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| Fill in this information to identify your case: |                               |
|---|-------------------------------|
| United States Bankruptcy Court for the:         |                               |
| Northern District of: Illinois (State)          |                               |
| Case number (if known)                          | Chapter you are filing under: |
|   | Chapter 7 Chapter 11          |
|   | Chapter 12 Chapter 13         |

#### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par  | Identify Yourself  |                            |   |
|------|--|----------------------------|---|
|      |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. ` | Your full name   | Hugo                       |   |
| \    | Write the name that is on  | First name                 | First name                                    |
|      | your government-issued<br>picture identification (for              | Middle name                | Middle name                                   |
|      | example, your driver's   | Villasana                  |   |
| I    | icense or passport   | Last name                  | Last name                                     |
| į    | Bring your picture dentification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2    | All other names you  |                            |   |
|      | have used in the last  | First name                 | First name                                    |
| 8    | 8 years  |                            |   |
| ı    | nclude your married or   | Middle name                | Middle name                                   |
|      | maiden names.  | Last name                  | Last name                                     |
|      |  |                            |   |
|      |  | First name                 | First name                                    |
|      |  | Middle name                | Middle name                                   |
|      |  |                            |   |
|      |  | Last name                  | Last name                                     |
|      | Only the last 4 digits of your Social                              | XXX - XX- 1274             |   |
|      | Security number or<br>federal Individual                           | OR                         | OR  |
| -    | Taxpayer<br>Identification number                                  | 9 xx - xx-                 | 9 xx - xx-                                    |
|      | (ITIN)   |                            |   |

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| D  | ebtor 1 Hugo<br>First Name                             | Villasana<br>Middle Name Last Name  | Case number (if known)   |
|----|--|---|--|
|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. | Any business names and Employer                        | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
|    | Identification Numbers (EIN) you have used in the last | Business name   | Business name  |
|    | 8 years  | Business name   | Business name  |
|    | Include trade names and doing business as names        | EIN   | EIN  |
|    |  | EIN   | EIN  |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:  |
|    |  | 1839 S. May Number Street   | Number Street  |
|    |  | ChicagoIllinois60608CityStateZip Code   | City State Zip Code  |
|    |  | Cook<br>County  | County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number Street   | Number Street  |
|    |  | City State Zip Code   | City State Zip Code  |
| 6  | \\/\/\   | City State Zip Code   | City State Zip Code  |
| 0. | Why you are choosing this district                     | Check one:  | Check one:   |
|    | to file for bankruptcy                                 | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|    |  |   | -  |
|    |  |   |  |
|    |  |   |  |
|    |  |   |  |
|    |  |   |  |

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| Debtor 1 Hugo   |  |  |   |   | Case number (if kno  | own)   |
|---|--|--|---|---|--|--|
| First Nam   | е  | Middle Nam   | ne La   | st Name   |  |  |
| Part 2: Tell the  | Court Abo  | ut Your Bankrup  | tcy Case  |   |  |  |
| <ol> <li>The chapte<br/>Bankruptcy<br/>are choosir<br/>under</li> </ol>                               | Code you   |  |   | of each, see <i>Notice Requ</i> ent to the top of page 1 and  |  | C. § 342(b) for Individuals Filing for opriate box.  |
| 8. How you w  | ill pay the  | more details a cashier's che may pay with  I need to pay Individuals to line in the official poyou choose to | about how you r ck, or money orc a credit card or the fee in insta p Pay Your Filing at my fee be wai ut is not required overty line that a | may pay. Typically, if you check with a pre-printe allments. If you choose a Fee in Installments (O ived (You may request d to, waive your fee, an pplies to your family simust fill out the Application. | ou are paying the submitting you ad address. This option, significial Form 103 this option only d may do so onling and you are use and you are used submitted. | the clerk's office in your local court for e fee yourself, you may pay with cash, ir payment on your behalf, your attorney on and attach the <i>Application for</i> BA).  If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you fi<br>bankruptcy<br>last 8 years  | within the   | ✓ No.  Yes. District  District   |   | When When When  | MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY   | Case number  Case number  Case number  |
| 10. Are any bar cases pend being filed I spouse who filing this cayou, or by a partner, or affiliate? | ing or<br>by a<br>b is not<br>ase with<br>business | ✓ No.  Yes. Debtor District Debtor District  |   | <u>W</u> hen  | MM / DD / YYYY   | Relationship to you  Case number, if known  Relationship to you  Case number, if known   |
| 11. Do you rent<br>residence?   | your   | ✓ No.  | r landlord obtaine<br>Go to line 12.  | tement About an Eviction  |  | o you want to stay in your residence?  st You (Form 101A) and file it with   |

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Villasana Debtor 1 Hugo \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Hugo Villasana Case number (if known)
First Name Middle Name Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Villasana Debtor 1 Hugo Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Hugo Villasana Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 1/30/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Hugo                                    |                            | Villasana             | Case number (if k            | nown)  |
|--|----------------------------|-----------------------|------------------------------|--|
| First Name                                       | Middle Name                | Last Name             |                              |  |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about<br>I States Code, and have explained the<br>so certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. §   | 342(b) and, in a case in w   | hich § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after    | an inquiry that the i | information in the schedu    | ules filed with the petition is incorrect.   |
| attorney, you do not                             | 4.5                        | . ,                   |                              | ·  |
| need to file this page.                          | /s/ Elizabeth Placek       |                       | Date                         | 1/30/2017  |
|  | Signature of Attorney for  | or Debtor             | ——— MI                       | M / DD / YYYY  |
|  |                            |                       |                              |  |
|  |                            |                       |                              |  |
|  | Elizabeth Placek           |                       |                              |  |
|  | Printed name               |                       |                              |  |
|  | Semrad Law Firm            |                       |                              |  |
|  | Firm name                  |                       |                              |  |
|  | 20 S. Clark Street         |                       |                              |  |
|  | Street                     |                       |                              |  |
|  | 28th Floor                 |                       |                              |  |
|  |                            |                       |                              |  |
|  | Chicago                    |                       | Illinois                     | 60603  |
|  | City                       |                       | State                        | Zip Code   |
|  |                            |                       |                              |  |
|  | Contact phone              | 3124477838            | Email address                | eplacek@semradlaw.com  |
|  |                            |                       |                              |  |
|  | <del></del>                |                       | Illinois                     |  |
|  | Bar number                 |                       | State                        |  |

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| Fill in this infor        | mation to identify your ca | ase:        |                              |  |
|---------------------------|----------------------------|-------------|------------------------------|--|
| Debtor 1                  | Hugo                       |             | Villasana                    |  |
|                           | First Name                 | Middle Name | Last Name                    |  |
| Debtor 2                  |                            |             |                              |  |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name                    |  |
| United States E           | Bankruptcy Court for the:  | Northern    | District of Illinois (State) |  |
| Case number<br>(If known) |                            |             | (State)                      |  |

|   | Check if | this    | is | an |
|---|----------|---------|----|----|
| _ | amende   | d filii | ng |    |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | <b>Your assets</b><br>Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B)  | \$17,000.00                                 |
| 1a. Copy line 55, Total real estate, from Schedule A/B   | \$3,947.00                                  |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | 40,017.00                                   |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$20,947.00                                 |
| art 2: Summarize Your Liabilities  |   |
|  | <b>Your liabilities</b><br>Amount you owe   |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)                                   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,     |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00                                      |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00                                      |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                     |   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                  | \$9,354.00                                  |
| Your total liabilities   | \$9,354.00                                  |
| Part 3: Summarize Your Income and Expenses   |   |
|  |   |
| I. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I      | \$2,459.54                                  |
| •  |   |
| . Schedule J: Your Expenses (Official Form 106J)   |   |

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| Deb  | otor 1 Hugo<br>First Name  | Middle Name                   | Villasana<br>Last Name         | Case number (if known)   |            |
|------|--|-------------------------------|--------------------------------|--|------------|
| Part |  |                               | ve and Statistical Reco        | ords   |            |
| [    | <b>_</b>   | •                             |                                | nit this form to the court with your other s                             | schedules. |
| _    | ✓ Yes.<br>What kind of debt do you ha                            | ve?                           |                                |  |            |
| [    |  |                               |                                | by an individual primarily for a personal, Il purposes. 28 U.S.C. § 159. |            |
| [    | Your debts are not prim this form to the court with              |                               | ı have nothing to report on t  | this part of the form. Check this box and                                | submit     |
|      | From the Statement of You<br>Form 122A-1 Line 11; <b>OR</b> , Fo |                               |                                | onthly income from Official  | \$1,929.37 |
| 9.   | Copy the following special                                       | categories of claims from     | n Part 4, line 6 of Schedul    | e E/F:   |            |
|      | From Part 4 on Schedule I  | E/F, copy the following:      |                                | Total claim  |            |
|      | 9a. Domestic support obliga                                      | tions (Copy line 6a.)         |                                | \$0.00   | _          |
|      | 9b. Taxes and certain other                                      | debts you owe the governm     | nent. (Copy line 6b.)          | \$0.00   | _          |
|      | 9c. Claims for death or person                                   | onal injury while you were in | toxicated. (Copy line 6c.)     | \$0.00   | _          |
|      | 9d. Student loans. (Copy lin                                     | e 6f.)                        |                                | \$0.00   | _          |
|      | 9e. Obligations arising out o priority claims. (Copy line 6g     |                               | divorce that you did not rep   | oort as \$0.00   | -          |
|      | 9f. Debts to pension or profi                                    | t-sharing plans, and other s  | similar debts. (Copy line 6h.) | \$0.00   | -          |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this                           | information to                                   | identify your o                                     | case:  |                      |  |  |          |   |  |
|--|--|---|--|----------------------|--|--|----------|---|--|
| Debtor 1                               | Hugo   |   |  |                      | Villasana  |  |          |   |  |
|  | First Na   | me  | Middle N   | lame                 | Last Name  | е  |          |   |  |
| Debtor 2<br>(Spouse, if fi             | ling) First Na                                   | me  | Middle N   | lame                 | Last Name  | e  |          |   |  |
| United Sta                             | ates Bankruptcy                                  | / Court for the:                                    | Northern   |                      | District of Illino   |  |          |   |  |
| Case num                               | nber   |   |  |                      | (State   | <del>=</del>                               |          |   |  |
| Officia                                | al Form 1  | 06A/B   |  |                      |  |  |          |   | Check if this is an amended filing   |
| Sche                                   | dule A/E   | 3: Prope  | erty   |                      |  |  |          |   | 12/1   |
| category v<br>responsibl<br>write your | where you thir<br>le for supplyin<br>name and ca | nk it fits best.<br>g correct info<br>se number (if | Be as complete a<br>rmation. If more s<br>known). Answer e | nd a<br>pace<br>very | ccurate as possible.<br>is needed, attach a  | If two married peopleseparate sheet to the | le are t | one category, list the filing together, both a m. On the top of any a                         | are equally  |
| 1. Do you                              |  |   | quitable interest  | in an                | y residence, building  | g, land, or similar pro                    | operty   | ?   |  |
|  | No. Go to Par                                    |   |  |                      |  |  |          |   |  |
| 1.1                                    | Yes. Where is  Street address                    |   | other description  | Wh                   | at is the property? C  |  | t        | he amount of any secu   | claims or exemptions. Put ured claims on Schedule D: nims Secured by Property.               |
|  | 1654 E Harrise<br>Number                         | on<br>Street  |  |                      | Duplex or multi-unit be<br>Condominium or cook<br>Manufactured or mob                      | perative                                   | •        | Current value of the entire property?   | Current value of the portion you own?<br>\$17000.00  |
|  | Brownsville City  Cameron County                 | Texas<br>State                                      | 78520<br>Zip Code  |                      | Land<br>Investment property<br>Timeshare<br>Other  |  | i        | Describe the nature on terest (such as fee see the entireties, or a life                      | simple, tenancy by   |
|  | ,  |   |  | Wh                   | o has an interest in   | the property? Check                        | -<br>] : | Check if this is co   | ommunity property  |
|  |  |   |  | one                  | e.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor                                      | 2 only                                     |          | _   |  |
|  |  |   |  | Ħ                    | At least one of the de   | btors and another                          |          |   |  |
|  |  |   |  | pro                  | ner information you v<br>perty identification<br>nber:                                     | vish to add about th                       | nis item | ı, such as local  |  |
| If you                                 | own or have m                                    | ore than one,                                       | ist here:  | Wh                   | at is the property? C  | Shock all that apply                       |          | Do not doduct socured   | claims or exemptions. Put  |
| 1.2                                    | Street address                                   | , if available, or                                  | other description  |                      | Single-family home<br>Duplex or multi-unit to<br>Condominium or coo<br>Manufactured or mot | ouilding<br>operative                      | t<br>(   | he amount of any secu   | rired claims on Schedule D: nims Secured by Property.  Current value of the portion you own? |
|  | Number  City                                     | Street<br>State                                     | Zip Code   |                      | Land Investment property Timeshare Other   |  | i        | Describe the nature on terest (such as fee she can be called as fee she entireties, or a life | simple, tenancy by   |
|  |  |   |  | Wh                   | o has an interest in too. Debtor 1 only  | the property? Check                        | · [      | Check if this is co<br>(see instructions)   | ommunity property  |
|  |  |   |  |                      | Debtor 2 only Debtor 1 and Debtor  | •  |          |   |  |
|  |  |   |  |                      | At least one of the de<br>ner information you ve<br>perty identification                   | vish to add about th                       | nis item | n, such as local  |  |

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| btor 1 Hugo  |  |  |  | oer <i>(if known)</i>  |   |
|--|--|--|--|--|---|
| First Name   | e  | Middle Name  | Last Name  |  |   |
| Street addres  | ss, if available, or o   | other description  | What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  | the amount of any secu   | claims or exemptions. Pured claims on Schedule laims Secured by Property.  Current value of the portion you own?  |
| Number<br>City   | Street<br>State  | Zip Code   | Land Investment property Timeshare Other  Who has an interest in the property? Check one.  |  | simple, tenancy by<br>e estate), if known.<br>community property  |
|  |  |  | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Other information you wish to add about this item  | (see instructions)   |   |
|  |  |  | property identification number:<br>all of your entries from Part 1, including any entr   |  |   |
|  |  |  | <b>&gt;</b>  |  |   |
| own, lease own that some ars, vans, truck  | eone else drives. I  | r equitable interes  | st in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts an rcycles  | -  |   |
| own that some ars, vans, truck No Yes  3.1 Make Model: Year:   | e, or have legal cone else drives. It is, tractors, sport  | r equitable interes f you lease a vehicle, utility vehicles, moto  Honda Accord 2000 | also report it on Schedule G: Executory Contracts an rcycles  Who has an interest in the property? Check one.  | d Unexpired Leases.  Do not deduct secured the amount of any sec   | d claims or exemptions. F<br>sured claims on <i>Schedule</i><br><i>laims Secured by Proper</i> t  |
| own that some ars, vans, truck No Yes 3.1 Make Model: Year: Approxi  | e, or have legal of  | or equitable interes f you lease a vehicle, utility vehicles, moto  Honda Accord     | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another   | d Unexpired Leases.  Do not deduct secured the amount of any sec   | ured claims on <i>Schedule</i>  |
| ow own, lease own that some ars, vans, truck No Yes 3.1 Make Model: Year: Approxit Other in  | e, or have legal cone else drives. It is, tractors, sport to the sport of the sport | r equitable interes f you lease a vehicle, utility vehicles, moto  Honda Accord 2000 | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check  | Do not deduct secured the amount of any secured the amount of any secured the amount of any secured the amount of the entire property?  \$825.00   | cured claims on Schedule laims Secured by Proper Current value of the portion you own? \$825.00   |
| ou own, lease own that some ars, vans, truck No Yes 3.1 Make Model: Year: Approxi  | e, or have legal cone else drives. It is, tractors, sport to the sport of the sport | r equitable interes f you lease a vehicle, utility vehicles, moto  Honda Accord 2000 | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)   | Do not deduct secured the amount of any sec Creditors Who Have Comments of the entire property?  \$825.00  Do not deduct secured the amount of any sec the | cured claims on Scheduliaims Secured by Proper  Current value of the portion you own?  \$825.00  d claims or exemptions. cured claims on Scheduli   |
| ou own, lease own that some own that some own, truck ow | e, or have legal cone else drives. It is, tractors, sport to the sport of the sport | r equitable interes f you lease a vehicle, utility vehicles, moto  Honda Accord 2000 | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.   | Do not deduct secured the amount of any sec Creditors Who Have Comments of the entire property?  \$825.00  Do not deduct secured the amount of any sec the | cured claims on Scheduliaims Secured by Proper  Current value of the portion you own? \$825.00  d claims or exemptions.  cured claims on Scheduliaims Secured by Proper                       |
| ou own, lease own that some ars, vans, truck No Yes  3.1 Make Model: Year: Approxi Other in  3.2 Make Model: Year: Approxi   | e, or have legal cone else drives. It is, tractors, sport is mate mileage:   | r equitable interes f you lease a vehicle, utility vehicles, moto  Honda Accord 2000 | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 1 and Debtor 2 only | Do not deduct secured the amount of any sec Creditors Who Have C.  Current value of the entire property?  \$825.00  Do not deduct secured the amount of any sec Creditors Who Have C.  | cured claims on Scheduli<br>laims Secured by Proper<br>Current value of the<br>portion you own?<br>\$825.00   |
| own wn, lease own that some ars, vans, truck No Yes  3.1 Make Model: Year: Approxi Other in  3.2 Make Model: Year: Approxi   | e, or have legal of eone else drives. It is, tractors, sport of mate mileage:  | r equitable interes f you lease a vehicle, utility vehicles, moto  Honda Accord 2000 | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only  | Do not deduct secured the amount of any sec Creditors Who Have C.  Current value of the entire property?  \$825.00  Do not deduct secured the amount of any sec Creditors Who Have C.  Current value of the  | cured claims on Scheduliaims Secured by Proper  Current value of the portion you own? \$825.00  d claims or exemptions.  cured claims on Scheduliaims Secured by Proper  Current value of the |

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|     | Hugo<br>First Name  | Middle Name | Villasana<br>Last Name   | Case numbe  | el (II KNOWI)   |  |
|-----|---|-------------|--|---|---|--|
| 3.3 | Make<br>Model:<br>Year:<br>Approximate mileage:   |             | Who has an interest in the one.  Debtor 1 only   | property? Check   | Do not deduct secured the amount of any secu Creditors Who Have Cla   | •  |
|     | Other information:  | <del></del> | Debtor 2 only Debtor 1 and Debtor 2 on   | alv.  | Current value of the entire property?   | Current value of the portion you own?  |
|     | Other information.  |             | At least one of the debtor   | •   |   |  |
|     |   |             |  |   |   |  |
|     |   |             | Check if this is commur instructions)  | nity property (see  |   |  |
| 3.4 | Make  |             | Who has an interest in the   | property? Check   | Do not deduct secured   |  |
|     | Model:  |             | one.   |   | the amount of any secu<br>Creditors Who Have Cla  |  |
|     | Year: Approximate mileage:  |             | Debtor 1 only  |   |   | ums becared by Froperi   |
|     |   |             | Debtor 2 only  |   | Current value of the<br>entire property?  | Current value of the portion you own?  |
|     | Other information:  |             | Debtor 1 and Debtor 2 on   | •   | entire property:  | portion you own?   |
|     |   |             | At least one of the debtor   | s and another   |   |  |
|     |   |             | Check if this is communinstructions)   | nity property (see  |   |  |
| _   | No<br>Yes   | <b>,</b>    | i, fishing vessels, snowmobiles, ı   | motorcycle accessor   | ies   |  |
|     |   |             | Who has an interest in the one.  | ·   | Do not deduct secured the amount of any secu  | red claims on <i>Schedule</i>  |
|     | Yes<br>Make<br>Model:<br>Year:  |             | Who has an interest in the   | ·   | Do not deduct secured   | red claims on <i>Schedule</i>  |
|     | Yes<br>Make<br>Model:   |             | Who has an interest in the one.  | ·   | Do not deduct secured the amount of any secuce Creditors Who Have Classification Current value of the   | ured claims on Schedule<br>nims Secured by Propert<br>Current value of the   |
|     | Yes<br>Make<br>Model:<br>Year:  |             | Who has an interest in the one.  Debtor 1 only   | property? Check   | Do not deduct secured<br>the amount of any secu<br>Creditors Who Have Cla   | red claims on <i>Schedule</i>  |
|     | Yes  Make  Model: Year: Approximate mileage:  |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only   | property? Check   | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule ims Secured by Propert Current value of the  |
|     | Yes  Make  Model: Year: Approximate mileage:  |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on  | property? Check hly s and another                                     | Do not deduct secured the amount of any secu Creditors Who Have Cla   | red claims on Schedule ims Secured by Proper Current value of the  |
| 4.1 | Yes  Make Model: Year: Approximate mileage: Other information:  |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor. Check if this is communinstructions) Who has an interest in the  | property? Check  bly s and another  hity property (see                | Do not deduct secured the amount of any secuce Creditors Who Have Classification Current value of the entire property?  Do not deduct secured   | red claims on Schedulaims Secured by Proper  Current value of the portion you own?  claims or exemptions.  |
| 4.1 | Yes  Make Model: Year: Approximate mileage: Other information:  Make Model:                             |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor. Check if this is communinstructions) Who has an interest in the one.   | property? Check  bly s and another  hity property (see                | Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu   | red claims on Schedulaims Secured by Proper  Current value of the portion you own?  claims or exemptions. I lired claims on Schedulaims on Sc |
| 4.1 | Yes  Make Model: Year: Approximate mileage: Other information:  Make Model: Year:                       |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor (instructions)  Who has an interest in the one. Debtor 1 only   | property? Check  bly s and another  hity property (see                | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications                     | red claims on Schedulinims Secured by Proper  Current value of the portion you own?  claims or exemptions.  Ired claims on Schedulinims Secured by Proper  |
| 4.1 | Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only Debtor 2 only               | property? Check  hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule ims Secured by Propent Current value of the portion you own?  claims or exemptions. I lired claims on Schedule ims Secured by Propent Current value of the  |
| 4.1 | Yes  Make Model: Year: Approximate mileage: Other information:  Make Model: Year:                       |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 2 only | property? Check  hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications                     | red claims on Scheduk nims Secured by Propen Current value of the portion you own?  claims or exemptions. I  |
| 4.1 | Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only Debtor 2 only               | property? Check  hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule ims Secured by Propent Current value of the portion you own?  claims or exemptions. I lired claims on Schedule ims Secured by Propent Current value of the  |
| 4.1 | Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: |             | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 2 only | property? Check  hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule ims Secured by Propent Current value of the portion you own?  claims or exemptions. I lired claims on Schedule ims Secured by Propent Current value of the  |

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Villasana Debtor 1 Hugo Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... **Used Electronics** \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... \$400.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1600.00 for Part 3. Write that number here .....

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| Debt         | or 1 Hugo<br>First Name                   | Middle Name  | Villasana<br>Last Name    | Case number (if known)                                      |  |
|--------------|---|--|---------------------------|---|--|
| Part 4       |   |  | LEST NAME                 |   |  |
| Doy          | ou own or have an                         | y legal or equitable interest  | in any of the followin    | g?  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 16. <b>C</b> | xamples: Money you ha                     |  |                           | n hand when you file your petition                          |  |
|              | ✓ Yes                                     |  |                           | Cash:   | \$35.00  |
| 17.          |   | avings, or other financial accounts<br>stitutions. If you have multiple ac |                           | ares in credit unions, brokerage houses, tution, list each. |  |
|              | ✓ Yes                                     |  | Institution name:         |   |  |
|              |   | 17.1. Checking account:  | MB Financial              |   | \$753.00   |
|              |   | 17.2. Checking account:  |                           |   | · <u></u>  |
|              |   | 17.3. Savings account:   |                           |   |  |
|              |   | 17.4. Savings account:   |                           |   |  |
|              |   | 17.5. Certificates of deposit:   |                           |   |  |
|              |   | 17.6. Other financial account:   |                           |   |  |
|              |   | 17.7. Other financial account:   |                           |   |  |
|              |   | 17.8. Other financial account:   |                           |   |  |
|              |   | 17.9. Other financial account:   |                           |   |  |
| 18.          | Examples: Bond funds                      | or publicly traded stocks<br>, investment accounts with broker             | age firms, money market a | accounts  |  |
|              | ✓ No<br>Yes                               | Institution or issuer name:  |                           |   |  |
|              |   |  |                           |   |  |
|              |   |  |                           |   |  |
| 19.          | an LLC, partnership, a                    |  | ted and unincorporated    | businesses, including an interest in                        |  |
|              | Yes. Give specific information about them | Name of entity   |                           | % of ownership:   |  |
|              | uioiii                                    |  |                           |   |  |

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| Deb | tor 1 Hugo   | Maria de Maria   | Villasana                  | Case number (if known)                      |       |
|-----|--|--|----------------------------|---|-------|
|     | First Name   | Middle Name  | Last Name                  |   |       |
| 20. | Negotiable instruments                             | orate bonds and other negotial<br>include personal checks, cashiers<br>ents are those you cannot transfe | checks, promissory no      | tes, and money orders.                      |       |
|     | ✓ No   | •  | , , ,                      |   |       |
|     | Yes. Give specific information about them          | Issuer name:   |                            |   |       |
|     |  |  |                            |   |       |
|     |  |  |                            |   |       |
|     |  |  |                            |   |       |
| 0.1 | Dativament av namaiav                              |  |                            |   |       |
| 21. | Retirement or pension<br>Examples: Interests in IF |  | , thrift savings accounts  | s, or other pension or profit-sharing plans |       |
|     | <b>✓</b> No  |  |                            |   |       |
|     | Yes. List each                                     | Type of account:   | Institution name:          |   |       |
|     | account  | 401(k) or similar plan:  |                            |   |       |
|     | separately.  | Pension plan:  |                            |   |       |
|     |  | IRA:   | -                          |   |       |
|     |  | Retirement account:  |                            |   | · -   |
|     |  |  | -                          |   |       |
|     |  | Keogh:   |                            |   |       |
|     |  | Additional account:  |                            |   |       |
|     |  | Additional account:  |                            |   |       |
| 22. |  | prepayments I deposits you have made so that with landlords, prepaid rent, publi                         |                            |   |       |
|     | ✓ No   |  | Institution name:          |   |       |
|     | Yes  | Florida  |                            |   |       |
|     |  | Electric:  |                            |   |       |
|     |  | Gas:   | -                          |   |       |
|     |  | Heating oil:   | -                          |   | . ——— |
|     |  | Security deposit on rental unit:   |                            |   | . ——— |
|     |  | Prepaid rent:  |                            |   |       |
|     |  | Telephone:   |                            |   |       |
|     |  | Water:   |                            |   |       |
|     |  | Rented furniture:  |                            |   |       |
|     |  | Other:   |                            |   |       |
| 23. | Annuities (A contract fo                           | or a periodic payment of money to  | you, either for life or fo | r a number of years)                        |       |
|     | <b>✓</b> No  |  |                            |   |       |
|     | Yes  | Issuer name and description:   |                            |   |       |
|     | <u> </u>   | -  |                            |   |       |
|     |  |  |                            |   |       |
|     |  |  |                            |   |       |
|     |  |  |                            |   |       |

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| Debt | or 1 Hugo<br>First Name  | Middle   | Villasana Name Last Name  | Case number (if known)   |   |
|------|--|--|---|--|---|
| 24.  | Interests in an  | education IRA, in an acc   | count in a qualified ABLE program, or und   | er a qualified state tuition program.  |   |
|      | ✓ No   | 0(b)(1), 529A(b), and 5290 astitution name and descrip   | (b)(1). ption. Separately file the records of any interes                               | sts.11 U.S.C. § 521(c):  |   |
|      | _  |  |   |  |   |
|      | _  |  |   |  |   |
| 25.  | Trusts, equitab<br>exercisable for   | -  | property (other than anything listed in line  | e 1), and rights or powers   |   |
|      | ✓ No  Yes. Describ   | ie   |   |  |   |
| 26.  |  |  | secrets, and other intellectual property es, proceeds from royalties and licensing agre | ements   |   |
|      | ✓ No Yes. Describ  | ve   |   |  |   |
| 27.  |  | hises, and other generaling permits, exclusive licen   | I intangibles ses, cooperative association holdings, liquor                             | licenses, professional licenses  |   |
|      | ✓ No  Yes. Describ   | ie   |   |  |   |
|      |  |  |   |  |   |
| Mor  | ney or property  | owed to you?   |   |  | Current value of the portion you own? Do not deduct secured claims or exemptions.                     |
|      | ney or property  Tax refunds owe   |  |   |  | portion you own? Do not deduct secured  |
|      | Tax refunds owe  | ed to you  | anticipated 2016 tax refund   | Federal:   | portion you own? Do not deduct secured  |
|      | Tax refunds owe  No Yes. Give spr about t you alre   | ed to you  ecific information hem, including whether eady filed the returns  | anticipated 2016 tax refund   | Federal: State:  | portion you own?  Do not deduct secured claims or exemptions.   |
| 28.  | Tax refunds owe  No Yes. Give spr about t you alre and the   | ed to you<br>ecific information<br>hem, including whether  | anticipated 2016 tax refund   |  | portion you own? Do not deduct secured claims or exemptions.  \$734.00                                |
| 28.  | Tax refunds owe  No Yes. Give spr about t you alre and the   | ed to you  ecific information hem, including whether eady filed the returns a tax years                                    | anticipated 2016 tax refund spousal support, child support, maintenance,                | State: Local:  | portion you own? Do not deduct secured claims or exemptions.  \$734.00  \$0.00  \$0.00                |
| 28.  | Tax refunds owe  No Yes. Give sprabout tyou alreand the  Family support  Examples: Past d  | ed to you  ecific information hem, including whether eady filed the returns e tax years                                    |   | State:  Local:  divorce settlement, property settlemen   | portion you own? Do not deduct secured claims or exemptions.  \$734.00  \$0.00  \$0.00                |
| 28.  | Tax refunds owe  No Yes. Give sprabout tyou alreand the  Family support  Examples: Past d  | ed to you  ecific information hem, including whether eady filed the returns a tax years                                    |   | State: Local:  | portion you own? Do not deduct secured claims or exemptions.  \$734.00  \$0.00  \$0.00                |
| 28.  | Tax refunds owe  No Yes. Give sprabout tyou alreand the  Family support  Examples: Past d  | ed to you  ecific information hem, including whether eady filed the returns e tax years                                    |   | State:  Local:  divorce settlement, property settlemen  Alimony:   | portion you own? Do not deduct secured claims or exemptions.  \$734.00  \$0.00  \$0.00  t             |
| 28.  | Tax refunds owe  No Yes. Give sprabout tyou alreand the  Family support  Examples: Past d  | ed to you  ecific information hem, including whether eady filed the returns e tax years                                    |   | State: Local: divorce settlement, property settlemen Alimony: Maintenance:   | portion you own? Do not deduct secured claims or exemptions.  \$734.00 \$0.00  t \$0.00 \$0.00        |
| 28.  | Tax refunds owe  No Yes. Give speabout to you alread the second that the second text is and the second text is a second text  | ecific information hem, including whether eady filed the returns tax years   |   | State: Local:  divorce settlement, property settlemen  Alimony:  Maintenance:  Support:  | portion you own? Do not deduct secured claims or exemptions.  \$734.00 \$0.00  \$0.00  \$0.00  \$0.00 |
| 28.  | Tax refunds owe  No Yes. Give spreadout to you alread the second t | ecific information hem, including whether eady filed the returns e tax years  ue or lump sum alimony, s ecific information |   | State: Local:  divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$734.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |
| 28.  | Tax refunds owe  No Yes. Give spreadout to you alread the second t | ecific information hem, including whether eady filed the returns tax years  ue or lump sum alimony, s ecific information   | spousal support, child support, maintenance,  | State: Local:  divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$734.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |

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| Deb  | tor 1 Hugo   |                             | Villasana                       | Case number (if known)                          |  |
|------|--|-----------------------------|---------------------------------|---|--|
|      | First Name   | Middle Name                 | Last Name                       |   |  |
| 31.  | Interests in insurance policie<br>Examples: Health, disability, or                             |                             | rings account (HSA); credit, ho | meowner's, or renter's insurance                |  |
|      | Yes. Name the insurance confeach policy and list its verification.                             | ompany                      | pany name:                      | Beneficiary:                                    | Surrender or refund value:   |
| 32.  | Any interest in property that If you are the beneficiary of a liv property because someone has | ring trust, expect procee   |                                 | or are currently entitled to receive            |  |
|      | Yes. Describe  |                             |                                 |   |  |
| 33.  | Claims against third parties, Examples: Accidents, employm                                     |                             |                                 | demand for payment                              |  |
|      | Yes. Describe  |                             |                                 |   |  |
| 34.  | Other contingent and unliquito set off claims  | –<br>idated claims of every | nature, including countercl     | aims of the debtor and rights                   |  |
|      | No Yes. Describe   |                             |                                 |   |  |
| 35.  | Any financial assets you did   | –<br>not already list       |                                 |   |  |
|      | Yes. Describe  |                             |                                 |   |  |
| 36.  | Add the dollar value of all of for Part 4. Write that number                                   | -                           |                                 |   | \$1522.00  |
| Part | 5: Describe Any Busines  | s-Related Property          | You Own or Have an In           | terest In. List any real estate in Part         | 1.   |
| 37.  | Do you own or have any lega  | I or equitable interest     | in any business-related pro     | perty?  |  |
|      | No. Go to Part 6. Yes. Go to line 38.  |                             |                                 | <b>p</b> D                                      | current value of the ortion you own? on ot deduct secured claims rexemptions |
| 38.  | Accounts receivable or com   | nissions you already e      | arned                           |   |  |
|      | Yes. Describe  |                             |                                 |   |  |
| 39.  | Office equipment, furnishing:<br>Examples: Business-related cor                                |                             | ems, printers, copiers, fax mac | chines, rugs, telephones, desks, chairs, electi | ronic devices  |
|      | ✓ No Yes. Describe   |                             |                                 |   |  |
|      |  |                             |                                 |   |  |

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| Deb   | tor 1 Hugo                          | Villasana   | Case number (if known)     |  |
|-------|-------------------------------------|---|----------------------------|--|
|       | First Name                          | Middle Name Last Name   |                            |  |
| 40.   | Machinery, fixtures, equipr         | ment, supplies you use in business, and tools of your trade       | <del>)</del>               |  |
|       | <b>✓</b> No                         |   |                            |  |
|       | Yes. Describe                       |   |                            |  |
|       |                                     |   |                            |  |
|       |                                     | <del>_</del>  |                            |  |
| 41.   | Inventory                           |   |                            |  |
|       | <b>✓</b> No                         |   |                            |  |
|       | Yes. Describe                       |   |                            |  |
|       |                                     |   |                            |  |
|       |                                     | <del>_</del>  |                            |  |
| 42.   | Interests in partnerships or        | r joint ventures  |                            |  |
|       | ✓ No                                |   |                            |  |
|       | Yes. Give specific                  | Name of entity:   | % of ownership:            |  |
|       | information about                   |   |                            |  |
|       | them                                |   |                            |  |
|       |                                     |   |                            |  |
|       |                                     |   |                            |  |
| 43. ( | Customer lists, mailing lists,      | , or other compilations   |                            |  |
|       | <b>√</b> No                         |   |                            |  |
|       |                                     | e personally identifiable information (as defined in 11 U.S.C. §  | 101(41A))?                 |  |
|       | <b>□</b> ′                          |   | <i>、</i>                   |  |
|       | No                                  |   |                            |  |
|       | Yes. Describe                       |   |                            |  |
|       |                                     |   |                            |  |
| 44.   | Any business-related prope          | erty you did not already list                                     |                            |  |
|       | <b>✓</b> No                         |   |                            |  |
|       | Yes. Give specific                  |   |                            |  |
|       | information                         |   |                            |  |
|       |                                     |   |                            |  |
|       |                                     | -   |                            |  |
|       |                                     |   |                            |  |
|       |                                     |   |                            |  |
|       |                                     |   |                            |  |
|       |                                     | <del></del>   |                            |  |
| 45.4  | Additional design of the control of | and the form Bod Estad after a control for the control            | . b H b. d                 |  |
|       |                                     | your entries from Part 5, including any entries for pages y<br>re |                            |  |
| •     |                                     |   |                            |  |
| Part  | Describe Any Farm-                  | <ul> <li>and Commercial Fishing-Related Property You O</li> </ul> | wn or Have an Interest In. |  |
|       | If you own or have an intere        | est in farmland, list it in Part 1.                               |                            |  |
| 46.   | Do you own or have any leg          | gal or equitable interest in any farm- or commercial fishin       | ng-related property?       |  |
|       | No. Go to Part 7.                   |   |                            | Current value of the                           |
|       | Yes. Go to line 47.                 |   |                            | portion you own?  Do not deduct secured claims |
|       | 100. 00 to line 17.                 |   |                            | or exemptions                                  |
| 47.   | Farm animals                        |   | -                          | ,  |
|       | Examples: Livestock, poultry        | , farm-raised fish  |                            |  |
|       | <b>✓</b> No                         |   |                            |  |
|       | Yes. Describe                       |   |                            |  |
|       |                                     |   |                            |  |
|       |                                     |   |                            |  |

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| Debt         | or 1 Hugo<br>First Name     |  | illasana<br>ast Name   | Case number (if known)       |             |
|--------------|-----------------------------|--|------------------------|------------------------------|-------------|
| 48.          | Crops-either growing of     |  | 201144110              |                              |             |
|              | <b>✓</b> No                 |  |                        |                              |             |
|              | Yes. Describe               |  |                        |                              |             |
|              |                             |  |                        |                              |             |
| 49.          | Farm and fishing equip      | ment, implements, machinery, fixture                                   | es, and tools of trade |                              |             |
|              | <b>✓</b> No                 |  |                        |                              |             |
|              | Yes. Describe               |  |                        |                              |             |
|              |                             |  |                        |                              |             |
| 50.          | Farm and fishing suppl      | ies, chemicals, and feed   |                        |                              |             |
|              | No Van Danaviha             |  |                        |                              |             |
|              | Yes. Describe               |  |                        |                              |             |
| E 1          | Any form and common         | cial fishing-related property you did r                                | act already list       |                              |             |
| 51.          | No                          | cial listillig-related property you did i                              | iot aiready list       |                              |             |
|              | Yes. Describe               |  |                        |                              |             |
|              |                             |  |                        |                              |             |
|              |                             |  |                        | [                            |             |
|              |                             | l of your entries from Part 6, including here                          |                        |                              |             |
|              |                             |  |                        | L                            |             |
|              |                             |  |                        |                              |             |
| Part 7       | 7: Describe All Pro         | perty You Own or Have an Intere  | st in That You Did N   | ot List Above                |             |
| 53.          |                             | perty of any kind you did not already li<br>s, country club membership | st?                    |                              |             |
|              | No No                       | s, country club membership   |                        |                              |             |
|              | Yes. Give specific          |  |                        |                              |             |
|              | information                 |  |                        |                              |             |
|              |                             |  |                        |                              |             |
| 54 A         | dd the dollar value of al   | l of your entries from Part 7. Write tha                               | at number here         |                              | •           |
| J4. A        | du the donar value of ar    | or your entires nom rait r. write the                                  | it number here         |                              |             |
|              |                             |  |                        |                              |             |
|              |                             |  |                        |                              |             |
|              |                             |  |                        |                              |             |
| Part 8       | List the Totals of          | Each Part of this Form   |                        |                              |             |
| 55. <b>F</b> | Part 1: Total real estate   | , line 2   |                        | <b>&gt;</b>                  | \$17000.00  |
| EC           | ant O tatal vahialaa lim    | - F  |                        |                              |             |
| -            | part 2 total vehicles, line |  | \$825.00               |                              |             |
|              |                             | d household items, line 15   | \$1600.00              |                              |             |
|              | art 4: Total financial as   |  | \$1522.00              |                              |             |
|              | Part 5: Total business-re   |  |                        |                              |             |
|              |                             | ishing-related property, line 52                                       |                        |                              |             |
|              | Part 7: Total other prope   | -  |                        |                              |             |
| 62. <b>1</b> | Total personal property.    | Add lines 56 through 61  | \$3947.00              | Convincence property total   | + \$3947.00 |
|              |                             |  |                        | Copy personal property total |             |
| 63 <b>T</b>  | otal of all property on S   | chedule A/B. Add line 55 + line 62                                     |                        |                              | \$20947.00  |
| 55.1         | Jan. O. a.i. property on o  |  |                        |                              |             |

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| Filli                           | in this infor  | mation to identify your ca  | ase:   |  |   |   |
|---------------------------------|--|---|--|--|---|---|
| Deb                             | otor 1   | Hugo  |  | Villasana  |   |   |
| Doh                             | otor 2   | First Name  | Middle Name  | Last Name  |   |   |
|                                 | otor 2<br>use, if filing)  | First Name  | Middle Name  | Last Name  |   |   |
| Uni                             | ted States B   | sankruptcy Court for the:   | Northern   | District of Illinois   |   |   |
| Cas                             | e number   |   |  | (State)  |   |   |
|                                 | own)   |   |  |  |   |   |
| Of                              | ficial   | Form 106C   |  |  |   | Check if this is amended filing   |
| Sc                              | hedul  | e C: The Prope  | erty You Claim   | as Exempt  |   | 12/·  |
|                                 | e a speci  | fic dollar amount as e  | exempt. Alternatively,   | you may claim the full   | fair market value   | ou claim. One way of doing so is to<br>of the property being exempted up to<br>ghts to receive certain benefits, and  |
| tax-<br>und<br>you<br>Par       | exempt r<br>er a law t<br>r exempti<br>t 1: Iden<br>Which set  | etirement funds—ma that limits the exempt on would be limited t tify the Property You t of exemptions are you   | ay be unlimited in dollation to a particular dollation to a particular dollato the applicable statu  Claim as Exempt  claiming? Check one only   | ar amount. However, if illar amount and the value itory amount.  | you claim an exer<br>lue of the property  | nption of 100% of fair market value<br>is determined to exceed that amoun   |
| tax-<br>und<br>you              | exempt r er a law t r exempti t 1: Iden Which set  | etirement funds—mathat limits the exemption would be limited to tify the Property You to fexemptions are you are claiming state and features.   | ay be unlimited in dollation to a particular do to the applicable status.  Claim as Exempt claiming? Check one only deral nonbankruptcy exe  | ar amount. However, if<br>illar amount and the val<br>itory amount.  If even if your spouse is filing<br>emptions. 11 U.S.C. § 522   | you claim an exer<br>lue of the property  |   |
| tax-<br>und<br>you              | exempt r er a law t r exempti t 1: Iden Which set  | etirement funds—mathat limits the exemption would be limited to tify the Property You to fexemptions are you are claiming state and features.   | ay be unlimited in dollation to a particular dollation to a particular dollato the applicable statu  Claim as Exempt  claiming? Check one only   | ar amount. However, if<br>illar amount and the val<br>itory amount.  If even if your spouse is filing<br>emptions. 11 U.S.C. § 522   | you claim an exer<br>lue of the property  |   |
| tax-<br>und<br>you              | exempt rer a law trexemptite to the complete treatment of the complete | etirement funds—mathat limits the exemption would be limited to tiffy the Property You are claiming state and feare claiming federal exerging the exemptions are stated and feare claiming federal exerging the exemptions are stated as a stated and feare claiming federal exerging the exemptions are stated as a stated and feare claiming federal exerging the exemptions. | ay be unlimited in dollation to a particular do to the applicable status.  Claim as Exempt  Claiming? Check one only deral nonbankruptcy exemptions. 11 U.S.C. § 522   | ar amount. However, if<br>illar amount and the val<br>itory amount.  If even if your spouse is filing<br>emptions. 11 U.S.C. § 522   | you claim an exer<br>lue of the property<br>g with you.<br>(b)(3)   |   |
| tax-<br>und<br>you<br>Par<br>1. | exempt rer a law trexemption to the rexemption t | etirement funds—mathat limits the exemption would be limited to tiffy the Property You are claiming state and feare claiming federal exerging the exemptions are stated and feare claiming federal exerging the exemptions are stated as a stated and feare claiming federal exerging the exemptions are stated as a stated and feare claiming federal exerging the exemptions. | ay be unlimited in dollation to a particular do to the applicable status of the applicable statu | ar amount. However, if illar amount and the valutory amount.  If even if your spouse is filing emptions. 11 U.S.C. § 522 (b)(2)  as exempt, fill in the information of the exempt of the | you claim an exerulue of the property  g with you. (b)(3)  nation below.  |   |
| tax-<br>und<br>you<br>Par<br>1. | exempt rer a law trexemption rexemption to the rexemption to the rexemption to the rexemption to the rexemption of the rexemption to the rexemption of the rexemption to the rexemption of the r | etirement funds—mathat limits the exemption would be limited to tify the Property You to fexemptions are you are claiming state and feare claiming federal exert roperty you list on Scheolard and feare claiming federal exert roperty you list on Scheolard the property acceptable A/B that lists this   | ay be unlimited in dollation to a particular dollation to a particular dollation to the applicable statu  Claim as Exempt  Claiming? Check one only deral nonbankruptcy exemptions. 11 U.S.C. § 522  dule A/B that you claim a  and Current value of the portion you own  Copy the value for Schedule A/B  | ar amount. However, if illar amount and the valutory amount.  If even if your spouse is filing emptions. 11 U.S.C. § 522 (b)(2)  as exempt, fill in the information of the exempt of the | you claim an exerulue of the property  g with you. (b)(3)  nation below.  | is determined to exceed that amoun  |
| tax-<br>und<br>you<br>Par<br>1. | exempt rer a law trexemption a law trexemption to the revenue of t | etirement funds—mathat limits the exemption would be limited to tify the Property You to fexemptions are you are claiming state and feare claiming federal exert roperty you list on Scheolard and feare claiming federal exert roperty you list on Scheolard the property acceptable A/B that lists this   | ay be unlimited in dollation to a particular do to the applicable statu  Claim as Exempt  Claiming? Check one only deral nonbankruptcy exemptions. 11 U.S.C. § 522 dule A/B that you claim a the portion you own  Copy the value for   | ar amount. However, if illar amount and the value of | you claim an exerulue of the property  g with you. (b)(3)  nation below.  ption you claim or each exemption.    | is determined to exceed that amount is determined to exceed the exceeding the |
| tax-<br>und<br>you<br>Par<br>1. | exempt rer a law trexemption rexemption to the rexemption to the rexemption which set on the rexemption of the rexemption of the resemble to the rexemption of the rexemption of the resemble to the rexemption of | etirement funds—mathat limits the exemption would be limited to tify the Property You to fexemptions are you are claiming state and feare claiming federal exert roperty you list on School cription of the property achedule A/B that lists this check as Accord, 2000   | ay be unlimited in dollation to a particular dollation to a particular dollation to the applicable statu  Claim as Exempt  Claiming? Check one only deral nonbankruptcy exemptions. 11 U.S.C. § 522  dule A/B that you claim a  and Current value of the portion you own  Copy the value for Schedule A/B  | ar amount. However, if llar amount and the value of the v | g with you. (b)(3)  nation below.  ption you claim or each exemption.  \$825.00  ket value, up to any           | is determined to exceed that amount is determined to exceed the exceeding the |
| tax-<br>und<br>you<br>Par<br>1. | exempt rer a law trer a law trexemption of the recent of t | etirement funds—mathat limits the exemption would be limited to tify the Property You to fexemptions are you are claiming state and feare claiming federal exert roperty you list on School cription of the property achedule A/B that lists this check and a Accord, 2000  | ay be unlimited in dollation to a particular dollation to a particular dollation to the applicable statu  Claim as Exempt  Claiming? Check one only deral nonbankruptcy exemptions. 11 U.S.C. § 522  dule A/B that you claim a  and Current value of the portion you own  Copy the value for Schedule A/B  | ar amount. However, if illar amount and the value of | g with you. (b)(3)  nation below.  ption you claim or each exemption.  \$825.00  ket value, up to any           | Specific laws that allow exemption  735 ILCS 5/12-1001(c)   |
| tax-<br>und<br>you<br>Par<br>1. | exempt rer a law trexemption a law trexemption trexemption trexemption trexemption trexemption which set and property trexemption and trexemption trex | etirement funds—mathat limits the exemption would be limited to tify the Property You to fexemptions are you are claiming state and feare claiming federal exemptions of the property you list on Scheolarity you list on Scheolarity you have a headle A/B that lists this chedule A/B that lists this a Accord, 2000  A/B:03  | ay be unlimited in dollation to a particular dollation to a particular dollation to the applicable statu  Claim as Exempt  Claiming? Check one only deral nonbankruptcy exemptions. 11 U.S.C. § 522  dule A/B that you claim a  and Current value of the portion you own  Copy the value for Schedule A/B  | ar amount. However, if llar amount and the value of the v | g with you. (b)(3)  nation below.  ption you claim or each exemption.  \$825.00  ket value, up to any ory limit | is determined to exceed that amount is determined to exceed the exceeding the |
| tax-<br>und<br>you<br>Par<br>1. | exempt rer a law trexemption a law trexemption trexemption trexemption trexemption trexemption which set and property trexemption and trexemption trex | etirement funds—mathat limits the exemption would be limited to tify the Property You to fexemptions are you are claiming state and feare claiming federal exemptions of the property you list on Scheolaription of the property at chedule A/B that lists this chedule A/B that lists this a Accord, 2000  | ay be unlimited in dollation to a particular do to the applicable statu  Claim as Exempt  Claiming? Check one only deral nonbankruptcy exemptions. 11 U.S.C. § 522 dule A/B that you claim a the portion you own  Copy the value for Schedule A/B  \$825.00  | ar amount. However, if llar amount and the valid llar amount.  If even if your spouse is filling emptions. 11 U.S.C. § 522 (b)(2)  Amount of the exemply one box for the exemp | g with you. (b)(3)  nation below.  ption you claim or each exemption.  \$825.00  ket value, up to any           | Specific laws that allow exemption  735 ILCS 5/12-1001(c)   |

☐ No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Villasana Debtor 1 Hugo Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$500.00 description: **✓** \$500.00 **Used Electronics** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$400.00 description: **✓** \$400.00 Ruger 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 10 Brief 735 ILCS 5/12-1001(a) \$400.00 description: **✓** \$400.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$35.00 description: \$35.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 Brief 735 ILCS 5/12-1001(b) \$753.00 description: **✓** \$753.00 Checking account, MB 100% of fair market value, up to any **Financial** applicable statutory limit

\$734.00

100% of fair market value, up to any

applicable statutory limit

Line from Schedule A/B:

description:

Line from Schedule A/B:

Brief

17

28

Federal, anticipated

2016 tax refund

\$734.00

735 ILCS 5/12-1001(b)

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|                         |                                   |                               |  | <u></u>                  |  |                                    |
|-------------------------|-----------------------------------|-------------------------------|--|--------------------------|--|------------------------------------|
| Fill in this in         | nformation to identify your ca    | ase:                          |  |                          |  |                                    |
| Debtor 1                | Hugo                              |                               | Villasana  |                          |  |                                    |
|                         | First Name                        | Middle Name                   | Last Name  |                          |  |                                    |
| Debtor 2                |                                   |                               |  |                          |  |                                    |
| (Spouse, if filin       | g) First Name                     | Middle Name                   | Last Name  |                          |  |                                    |
| United State            | es Bankruptcy Court for the:      | Northern                      | District of Illinois   |                          |  |                                    |
|                         |                                   |                               | (State)  |                          |  |                                    |
| Case numb<br>(If known) | er                                |                               |  |                          |  |                                    |
| Officia                 | al Form 106D                      |                               |  |                          |  | Check if this is an amended filing |
| Sched                   | dule D: Credit                    | ors Who Ha                    | ve Claims Secu   | red by Prop              | erty                                       | 12/15                              |
| more space              |                                   |                               | e are filing together, both are e<br>nber the entries, and attach it to  |                          |  |                                    |
| 1. Do an                | y creditors have claims s         | secured by your proper        | ty?  |                          |  |                                    |
| <b>✓</b> N              | o. Check this box and subr        | mit this form to the court    | with your other schedules. You h   | ave nothing else to repo | ort on this form.                          |                                    |
| ☐ Y                     | es. Fill in all of the informatio | n below.                      |  |                          |  |                                    |
| Part 1: Li              | ist All Secured Claims            |                               |  |                          |  |                                    |
| for eac                 |                                   | ditor has a particular claim, | red claim, list the creditor separately<br>list the other creditors in Part 2. As<br>g to the creditor's name. |                          | Column B Value of collateral that supports | Column C Unsecured portion If any  |

this claim

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| Debtor 1 Hugo Villasana First Name Middle Name Last Name  Debtor 2 (Spouse, if filling) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois (State)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106B). Do not include any creditors with partially secured claims that are listed in Schedule B: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |                                      |   |  |   |  |   |  |   |   |
|--|--------------------------------------|---|--|---|--|---|--|---|---|
| First Name   Middle Name   Last Name   | Fill                                 | in this infor   | mation to identify your c  | ase:  |  |   |  |   |   |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the:   Northern   | Deb                                  | otor 1  |  |   |  |   |  |   |   |
| United States Bankruptcy Court for the: Northern District of Illinois (State)  Case number (If known)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical calem, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  | l                                    | _   | First Name   | Middle Name   | Last Name  |   |  |   |   |
| United States Bankruptcy Court for the: Northern District of Illinois  Case number  (Kinown)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule B. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule B. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule B. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule B. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule B. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule B. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule B. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule B. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with PRIORITY Unsecured Claims and Part 2. If you have more special part 3. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) |                                      |   | First Name a   | Middle Name   | Look None  |   |  |   |   |
| Case number ((Known))  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Ves.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   | (Opc                                 | ruse, ii iiiiig)  | riisi name   | Middle Name   | Last Name  |   |  |   |   |
| Case number ((Itknown))  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   | Uni                                  | ted States B  | Sankruptcy Court for the:  | Northern  | District of Illinois   |   |  |   |   |
| Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Ves.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |                                      |   |  |   | (State)  |   |  |   |   |
| Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |                                      |   |  |   |  |   |  |   |   |
| Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Ves.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, as much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  | Of                                   | ficial F  | orm 106F/F   |   |  |   | Ch   | eck if this is a                                  | n amended filing                                  |
| Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |                                      |   |  |   |  |   | _  |   |   |
| other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   | Sc                                   | chedu   | ule E/F: Cre   | editors Who   | Have Unse  | cured Claims  |  |   | 12/15   |
| Yes.  List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  | othe<br>Forn<br>clair<br>the<br>know | er party to a<br>n 106A/B) a<br>ms that are<br>entries in t<br>wn). | any executory contracts<br>and on <i>Schedule G: Exe</i><br>e listed in <i>Schedule D:</i> C<br>he boxes on the left. At | s or unexpired leases that<br>cutory Contracts and Une<br>creditors Who Hold Claims<br>tach the Continuation Pa | could result in a claim.<br>expired Leases (Official I<br>Secured by Property. If          | Also list executory contracts<br>Form 106G). Do not include a<br>more space is needed, copy     | s on <i>Sched</i><br>iny credito<br>the Part y | lule A/B: Pro<br>ers with partia<br>ou need, fill | perty (Official<br>ally secured<br>it out, number |
| Yes.  List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  | 1.                                   | Do any cr   | reditors have priority ur  | secured claims against v  | ou?  |   |  |   |   |
| Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   |                                      |   |  |   |  |   |  |   |   |
| listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |                                      | Yes.  |  |   |  |   |  |   |   |
|  | 2.                                   | listed, ider<br>As much a<br>Continuati                             | ntify what type of claim it<br>as possible, list the claims<br>ion Page of Part 1. If mor                                | is. If a claim has both priorit<br>s in alphabetical order accord<br>e than one creditor holds a                | y and nonpriority amounts<br>ling to the creditor's name<br>particular claim, list the oth | s, list that claim here and show<br>e. If you have more than two pr<br>her creditors in Part 3. | both priorit                                   | y and nonprio                                     | ority amounts.                                    |
|  |                                      | (For an ex  | planation of each type of  | claim, see the instructions f   | or this form in the instruct   | ion booklet.)   | Total  | Driority  | Nonpriority                                       |

claim

amount

amount

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| Debto   | or 1 H             | Hugo   | Villasana                    | Case number (if known)  |
|---------|--------------------|--|------------------------------|---|
|         | F                  | First Name Middle Name   | Last Name                    |   |
| Part 2  | 2: L               | List All of Your NONPRIORITY Unsecure  | d Claims                     |   |
| ן [     | <u></u>            | ny creditors have nonpriority unsecured claims No. You have nothing to report in this part. Sub Yes. | •                            | with your other schedules.  |
| u<br>It | ınsec<br>f moi     | cured claim, list the creditor separately for each clair   | n. For each claim listed, ic | e creditor who holds each claim. If a creditor has more than one priority entify what type of claim it is. Do not list claims already included in Part 1. you have more than four priority unsecured claims fill out the Continuation |
|         |                    |  |                              | Total claim   |
| 4.1     | BK                 | OF AMER  | Last A                       | digits of account number \$6,218.00   |
|         | PO                 | npriority Creditor's Name<br>BOX 1598  |                              | was the debt incurred? 4/1/2004   |
|         | Nur                | mber Street  | As of t                      | he date you file, the claim is: Check all that apply.   |
|         |                    |  |                              | ontingent   |
|         | City               | PRFOLK Virginia 235<br>v State Zip   | Code Ur                      | liquidated  |
|         | ,                  | no incurred the debt? Check one.   |                              | sputed  |
|         | V                  | Debtor 1 only  |                              | •   |
|         | H                  | Dobtor 2 only  | Type o                       | f NONPRIORITY unsecured claim:  |
|         | Ш                  | Debtor 2 only  | ☐ St                         | udent loans   |
|         |                    | Debtor 1 and Debtor 2 only   |                              | oligations arising out of a separation agreement or<br>corce that you did not report as priority claims   |
|         | H                  | At least one of the debtors and another  Check if this claim relates to a community de               | De                           | bits to pension or profit-sharing plans, and other similar bits   |
|         | ∟∟<br>Is t         | the claim subject to offset?   |                              | her. Specify CreditCard   |
|         | <b>✓</b>           | No   |                              |   |
|         |                    | Yes  |                              |   |
| 4.2     |                    | P ONE<br>npriority Creditor's Name   | Last 4                       | digits of account number \$3,136.00   |
|         | 265                | 525 N ŘIVERWOODS BLVD  | When                         | was the debt incurred? 3/1/2005   |
|         | Nur                | mber Street  | _                            | he date you file, the claim is: Check all that apply.   |
|         |                    |  |                              | ontingent   |
|         | ME<br>City         | TTAWA Illinois 600<br>v State Zip  | Code Ur                      | liquidated  |
|         | - ,                | o incurred the debt? Check one.  |                              | sputed  |
|         |                    | Debtor 1 only  | _                            |   |
|         |                    |  | Type o                       | f NONPRIORITY unsecured claim:  |
|         | Ш                  | Debtor 2 only  | ☐ St                         | udent loans   |
|         |                    | Debtor 1 and Debtor 2 only   |                              | oligations arising out of a separation agreement or<br>corce that you did not report as priority claims   |
|         | 님                  | At least one of the debtors and another  Check if this claim relates to a community de               | De                           | bits to pension or profit-sharing plans, and other similar bits   |
|         | LL<br>Ic t         | · · · · · · · · · · · · · · · · · · ·  | a c                          | her. Specify CreditCard   |
|         |                    | the claim subject to offset?   | <b>▼</b> ○                   | Ordinary Ordinary   |
|         | $\mathbf{\Lambda}$ | No   |                              |   |
|         |                    | Yes  |                              |   |

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Debtor 1 Hugo Villasana Case number (if known)

| First Na                    | me Middle Name Last Name   |       |                             |         |
|-----------------------------|--|-------|-----------------------------|---------|
| Part 4: Add th              | ne Amounts for Each Type of Unsecured Claim  |       |                             |         |
|                             | mounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. | for s | tatistical reporting purpos | es only |
|                             |  |       | Total claims                |         |
| Total claims from Part 1    | 6a. Domestic support obligations.  | 6a.   | \$0.00                      |         |
|                             | 6b. Taxes and certain other debts you owe the government   | 6b.   | \$0.00                      |         |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.   | \$0.00                      |         |
|                             | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                  | 6d.   | \$0.00                      |         |
|                             | 6e. Total. Add lines 6a through 6d.  | 6e.   | \$0.00                      |         |
|                             |  |       | Total claims                |         |
|                             |  |       | Total claims                |         |
| Total claims<br>from Part 2 | 6f. Student loans  | 6f.   | \$0.00                      |         |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g.   | \$0.00                      |         |
|                             | 6h. Debts to pension or profit-sharing plans, and other similar debts  | 6h.   | \$0.00                      |         |
|                             | Other. Add all other nonpriority unsecured claims. Write that amount here.                                   | 6i.   | \$9,354.00                  |         |
|                             | 6j. Total. Add lines 6f through 6i.  | 6j.   | \$9,354.00                  |         |

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| Fill in this infor        | mation to identify your c | ase:        |                              |
|---------------------------|---------------------------|-------------|------------------------------|
| Debtor 1                  | Hugo                      |             | Villasana                    |
|                           | First Name                | Middle Name | Last Name                    |
| Debtor 2                  |                           |             |                              |
| (Spouse, if filing)       | First Name                | Middle Name | Last Name                    |
| United States E           | Sankruptcy Court for the: | Northern    | District of Illinois (State) |
| Case number<br>(If known) |                           |             | (otato)                      |

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| F   | Person or compa        | ny with whom you have | the contract or lease | State what the contract or lease is for             |
|-----|------------------------|-----------------------|-----------------------|---|
| 2.1 | Raymundo, Paul<br>Name |                       |                       | Residential Lease, Debtor is Lessee, month to month |
|     | 1839 S May<br>Number   | Street                |                       |   |
|     | Chicago                | Illinois              | 60608                 |   |
|     | City                   | State                 | Zip Code              |   |

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|                   |  | DC   | cument Page                   | 27 01 70   |
|-------------------|--|--|-------------------------------|--|
| Fill in this in   | nformation to identify your                            | case:  |                               |  |
| Debtor 1          | Hugo   |  | Villasana                     |  |
| Debtor 2          | First Name   | Middle Name  | Last Name                     |  |
| (Spouse, if filin | g) First Name  | Middle Name  | Last Name                     |  |
| United State      | es Bankruptcy Court for the                            | e: Northern  | District of Illinois          |  |
| Case numb         | er   |  | (State)                       |  |
| Officia           | al Form 106H   |  |                               | Check if this is an amended filing                                     |
| Sched             | ule H: Your Co   | debtors  |                               | 12/15  |
| 1. Do you         | wer every question.  I have any codebtors? (If lo  'es | you are filing a joint case, do                            | not list either spouse as a   | codebtor.)   |
| Idaho,            |  | u lived in a community pro<br>exico, Puerto Rico, Texas, W |                               | Community property states and territories include Arizona, California, |
|                   | 'es. Did your spouse, forr<br>No                       | ner spouse, or legal equiva                                | lent live with you at the tir | ne?  |
|                   | Yes. In which commu                                    | nity state or territory did you                            | ı live?                       | Fill in the name and current address of that person.                   |
|                   | Name of your spouse                                    | , former spouse, or legal equ                              | ivalent                       | <u></u>  |
|                   | Number Street  |  |                               |  |
|                   | City   | State  | Zip Cod                       | <del></del>  |
| 3. In Colu        | ımn 1. list all of vour cod                            | ebtors. Do not include vou                                 | r spouse as a codebtor if     | your spouse is filing with you. List the person shown in line 2        |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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|  |  | 20   | oamone                           | . ago zo          | 01.10             |                          |   |  |
|--|--|--|----------------------------------|-------------------|-------------------|--------------------------|---|--|
| Fill in this in  | formation to identify  | your case:   |                                  |                   |                   |                          |   |  |
| Debtor 1   | Hugo   |  | Villasa                          | na                |                   |                          |   |  |
|  | First Name   | Middle Name  | Last N                           | lame              | — Che             | eck if this is:          |   |  |
| Debtor 2   | g) First Name  | Middle Nesse   | l and N                          |                   | _                 | An amended filing        |   |  |
| (Spouse, ii iiiiii   | First Name   | Middle Name  | Last N                           |                   |                   | · ·                      | nost-notition chapter 19                |  |
| United States the: Case numbe                              | s Bankruptcy Court for   | Northern   | _ District of Illi<br>(S         | inois<br>State)   |                   | expenses as of the follo | post-petition chapter 13<br>owing date: |  |
| (If known)   | ·  |  |                                  |                   | _                 | MM / DD / YYYY           |   |  |
| Official   | Form 106I  |  |                                  |                   |                   |                          |   |  |
| Schedu   | ıle I: Your İn   | come   |                                  |                   |                   |                          | 12/15                                   |  |
| information<br>spouse. If m<br>number (if k                | about your spouse. I   |  | d your spous                     | se is not filing  | y with you, do    | not include information  | tion about your                         |  |
| Fill in yo informat  | ur employment  |  | Debtor 1                         |                   |                   | Debtor 2                 |   |  |
|  |  | Employment status  | <b>✓</b> Emplo                   | oved              |                   | Employed                 |   |  |
| If you have more than one job, attach a separate page with |  |  |                                  | mployed           |                   | Not Employed             |   |  |
|  | on about additional  | Occupation   | unknown                          |                   |                   |                          |   |  |
|  | art time, seasonal, or oyed work.  | Employer's name  | Chicago P                        | Public Schools    |                   |                          |   |  |
|  |  | Employer's address   | 42 W Madison St<br>Number Street |                   |                   |                          |   |  |
|  | on may include student<br>naker, if it applies.                                |  |                                  |                   |                   | Number Street            |   |  |
|  |  |  | Payroll Services                 |                   |                   |                          |   |  |
|  |  |  | Chicago<br>City                  | Illinois<br>State | 60602<br>Zip Code | City                     | State Zip Code                          |  |
|  |  | How long employed there?                                   |                                  |                   |                   |                          | _                                       |  |
| Part 2: Gi   | ve Details About N   | Monthly Income   |                                  |                   |                   |                          |   |  |
| spouse unle<br>If you or you<br>more space                 | ess you are separated.<br>ur non-filing spouse hav<br>e, attach a separate she |  | combine the                      | information for   | •                 | ·                        | ,                                       |  |
| deducti<br>be.   | ons.) If not paid monthly  | ary, and commissions (befo<br>, calculate what the monthly |                                  | 2.                | \$3,249.89        |                          | _                                       |  |
|  | te and list monthly ove  |  |                                  | 3.                | + \$0.00          |                          | <del>_</del>                            |  |
| 4. Calcula   | ate gross income. Add I  | ine 2 + line 3.  |                                  | 4.                | \$3,249.89        |                          | _                                       |  |

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| Debtor 1Hugo<br>First Name  |  | asana<br>st Name  | Case number           | (if                               |                          |
|---|--|-------------------|-----------------------|-----------------------------------|--------------------------|
| Tilot Raine   | Middle Hamb  | , rame            | For Debtor 1          | For Debtor 2 or non-filing spouse |                          |
| Copy line 4 here  |  | <b>→</b> 4.       | \$3,249.89            |                                   |                          |
| 5. List all payroll deductions:                                       |  |                   |                       |                                   |                          |
| 5a. Tax, Medicare, and Social S                                       | Security deductions  | 5a.               | \$576.03              |                                   |                          |
| 5b. Mandatory contributions fo  | or retirement plans  | 5b.               | \$0.00                |                                   |                          |
| 5c. Voluntary contributions for                                       | retirement plans   | 5c.               | \$0.00                |                                   |                          |
| 5d. Required repayments of ref  | tirement fund loans  | 5d.               | \$68.25               |                                   |                          |
| 5e. Insurance   |  | 5e.               | \$80.62               |                                   |                          |
| 5f. Domestic support obligation                                       | ns   | 5f.               | \$0.00                |                                   |                          |
| 5g. <b>Union dues</b>   |  | 5g.               | \$0.00                |                                   |                          |
| 5h. Other deductions. Specify:  | Uniform Costs  | 5h. +             | \$65.46 +             |                                   |                          |
| 6. Add the payroll deductions. Add +5h.                               | d lines 5a + 5b + 5c + 5d + 5e +5f +   | 5g 6.             | \$790.36              |                                   |                          |
| 7. Calculate total monthly take-he                                    | ome pay. Subtract line 6 from line 4.  | . 7.              | \$2,459.54            |                                   |                          |
| 8. List all other income regularly                                    | received:  |                   |                       |                                   |                          |
| 8a. Net income from rental pro<br>business, profession, or far        | m  |                   |                       |                                   |                          |
|   | roperty and business showing necessary business expenses, and  | 8a.               | \$0.00                |                                   |                          |
| 8b. Interest and dividends  |  | 8b.               | \$0.00                |                                   |                          |
| 8c. Family support payments the dependent regularly receives          | hat you, a non-filing spouse, or a   |                   | _                     |                                   |                          |
| Include alimony, spousal sup divorce settlement, and prope            | port, child support, maintenance,<br>erty settlement.  | 8c.               | \$0.00                |                                   |                          |
| 8d. Unemployment compensat  | ion  | 8d.               | \$0.00                |                                   |                          |
| 8e. Social Security   |  | 8e.               | \$0.00                |                                   |                          |
|   | he value (if known) of any non-<br>ve, such as food stamps (benefits   | 8f.               | \$0.00                |                                   |                          |
| 8g. Pension or retirement inco  | ome  | 8g.               | \$0.00                |                                   |                          |
| 8h. Other monthly income. Spe   | ecify:   | 8h. +             | \$0.00 +              |                                   |                          |
| 9. Add all other income Add lines 8                                   | -  | Bh. 9.            | \$0.00                |                                   |                          |
| 10. Calculate monthly income. Add Add the entries in line 10 for Debt | d line 7 + line 9.<br>tor 1 and Debtor 2 or non-filing spot  | 10.<br>use        | \$2,459.54 +          |                                   | \$2,459.54               |
| friends or relatives.   | outions to the expenses that you li<br>married partner, members of your ho<br>ady included in lines 2-10 or amount | ousehold, your d  | ependents, your roomn |                                   |                          |
| Specify:  |  |                   |                       |                                   | 11. + \$0.00             |
| 12. Add the amount in the last co<br>Write that amount on the Summa   | lumn of line 10 to the amount in I<br>ary of Schedules and Statistical Sumi  |                   |                       |                                   | 12. \$2,459.54  Combined |
| 13. Do you expect an increase or No.                                  | decrease within the year after yo  | u file this form? |                       |                                   | monthly income           |
| Yes. Explain:   |  |                   |                       |                                   |                          |

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|                                    |  | Docu   | ument Page 30 of 70  | )                                    |                                 |
|------------------------------------|--|--|--|--------------------------------------|---------------------------------|
| Fill in this infor                 | mation to identify yo                          | ur case:   |  |                                      |                                 |
| Debtor 1                           | Hugo<br>First Name                             | Middle Name  | Villasana<br>Last Name   |                                      |                                 |
| Debtor 2                           |  |  |  | Check if this is:  An amended filing | na                              |
| (Spouse, if filing)                | First Name                                     | Middle Name  | Last Name  | 브                                    | howing post-petition chapter 13 |
| United States E                    | Bankruptcy Court for t                         | he: Northern   | District of Illinois (State)   |                                      | the following date:             |
| Case number<br>(If known)          | -  |  |  | MM / DD / YYYY                       | <del>/</del>                    |
| Official                           | Form 106                                       | J  |  |                                      |                                 |
| Schedul                            | e J: Your E                                    | xpenses  |  |                                      | 12/15                           |
| information. If                    | •  |  | re filing together, both are equal<br>form. On the top of any addition |                                      |                                 |
| Part 1: Des                        | cribe Your House                               | ehold  |  |                                      |                                 |
| 1. Is this a joi                   | nt case?                                       |  |  |                                      |                                 |
| ✓ No. Go                           | to line 2                                      |  |  |                                      |                                 |
| Yes. D                             | oes Debtor 2 live in                           | a separate household?  |  |                                      |                                 |
| г                                  | No   |  |  |                                      |                                 |
|                                    | Yes. Debtor 2 mus                              | st file Official Forms 106J-2, Exper                                       | nses for Separate Household of Deb                                     | tor 2.                               |                                 |
| 2. Do you hav                      | e dependents?                                  | No   |  |                                      |                                 |
| Do not list D<br>Debtor 2.         | Debtor 1 and                                   | Yes. Fill out this information for each dependent                          | Dependent's relationship to<br>Debtor 1 or Debtor 2                    | Dependent's age                      | Does dependent live with you?   |
|                                    | penses include<br>f people other               | No   |  |                                      |                                 |
| than<br>yourself and<br>dependents | _  | Yes  |  |                                      |                                 |
| · ·                                |  |  |  |                                      |                                 |
| Part 2: Estil                      | mate Your Ongoii                               | ng Monthly Expenses  |  |                                      |                                 |
| _                                  | of a date after the b                          |  | you are using this form as a suppl<br>oplemental Schedule J, check the | •                                    | -                               |
|                                    |  | on-cash government assistance<br>ed it on Sc <i>hedule I: Your Incom</i> e |  |                                      | Your expenses                   |
|                                    | I or home ownership<br>or the ground or lot. 4 |  | nclude first mortgage payments and                                     |                                      | <u>\$525.00</u>                 |
|                                    | uded in line 4:                                |  |  |                                      | ••                              |

\$0.00

\$0.00

\$0.00

\$200.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Hugo Villasana Case number (if known)
First Name Middle Name Last Name

| First Name   | Middle Name Last Name                            |                               |     |               |
|--|--|-------------------------------|-----|---------------|
|  |  |                               |     | Your expenses |
| 5. Additional mortgage paym                                      | ents for your residence, such as home equity     | loans                         | 5.  | \$0.00        |
| 6. Utilities:  |  |                               |     |               |
| 6a. Electricity, heat, natural g                                 | as   |                               | 6a. | \$250.00      |
| 6b. Water, sewer, garbage co                                     | ollection  |                               | 6b. | \$0.00        |
| 6c. Telephone, cell phone, I                                     | nternet, satellite, and cable services           |                               | 6c. | \$150.00      |
| 6d. Other. Specify:  |  |                               | 6d  | \$0.00        |
| 7. Food and housekeeping su                                      | pplies   |                               | 7.  | \$350.00      |
| 8. Childcare and children's e                                    | ducation costs                                   |                               | 8.  | \$0.00        |
| 9. Clothing, laundry, and dry                                    | cleaning   |                               | 9.  | \$100.00      |
| 10. Personal care products a                                     | nd services                                      |                               | 10. | \$60.00       |
| 11. Medical and dental exper                                     | ses  |                               | 11. | \$50.00       |
| 12. <b>Transportation.</b> Include ga                            | s, maintenance, bus or train fare.<br>s          |                               | 12. | \$300.00      |
| 13. Entertainment, clubs, rec                                    | reation, newspapers, magazines, and books        |                               | 13. | \$0.00        |
| 14. Charitable contributions                                     | and religious donations                          |                               | 14. | \$20.00       |
| 15. <b>Insurance.</b> Do not include insurance de                | ducted from your pay or included in lines 4 or 2 | 0.                            |     |               |
| 15a. Life insurance  |  |                               | 15a | \$0.00        |
| 15b. Health insurance  |  |                               | 15b | \$0.00        |
| 15c. Vehicle insurance   |  |                               | 15c | \$50.00       |
| 15d. Other insurance. Specif                                     | у <u>:</u>                                       |                               | 15d | \$0.00        |
| 16. Taxes. Do not include taxes                                  | deducted from your pay or included in lines 4    | or 20.                        |     |               |
| Specify: Texas Land - prop                                       | erty taxes                                       |                               | 16  | \$100.00      |
| 17. Installment or lease paym                                    | ents:  |                               | 10  |               |
| 17a. Car payments for Vehic                                      |  |                               | 17a | \$0.00        |
| 17b. Car payments for Vehic                                      | le 2   |                               | 17b | \$0.00        |
| 17c. Other. Specify:   |  |                               | 17c | \$0.00        |
| 17d. Other. Specify:   |  |                               | 17d | \$0.00        |
| 18. Your payments of alimony                                     | , maintenance, and support that you did no       | report as deducted from       |     | \$0.00        |
|  | ule I, Your Income (Official Form 106I).         |                               | 18. |               |
|  | to support others who do not live with you.      |                               |     |               |
| Specify:   |  |                               | 19. | \$0.00        |
| 20. <b>Other real property expen</b> 20a. Mortgages on other pro | ses not included in lines 4 or 5 of this form o  | r on schedule I: Your Income. | 200 | <b>\$0.00</b> |
| 20b. Real estate taxes.  | , p  |                               | 20a | \$0.00        |
| 20c. Property, homeowner's                                       | or renter's insurance                            |                               | 20b | \$0.00        |
|  |  |                               | 20c | \$0.00        |
| 20d. Maintenance, repair, an                                     |  |                               | 20d | \$0.00        |
| 20e. Homeowner's associati                                       | on or condominium dues                           |                               | 20e | \$0.00        |

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| Debtor 1 Hugo                 |   | Villasana   | Case number (if known) |     |            |  |
|-------------------------------|---|-------------|------------------------|-----|------------|--|
| First Name                    | Middle Name   | Last Name   |                        |     |            |  |
| 21. Other. Specify:           |   |             | :                      | 21  | \$0.00     |  |
|                               |   |             |                        |     |            |  |
| 22. Calculate your monthly e  | •   |             |                        | _   | \$2,155.00 |  |
| 22a. Add lines 4 through 21   |   |             |                        | _   | \$0.00     |  |
| , , ,                         | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses. |             |                        |     |            |  |
| 22c. Add line 22a and 22b.    | The result is your monthly exp  | enses.      | 2                      | 22. |            |  |
| 23. Calculate your monthly no | et income.  |             |                        |     |            |  |
| 23a. Copy line 12 (your cor   | nbined monthly income) from   | Schedule I. | 2                      |     | \$2,459.54 |  |
| 23b. Copy your monthly ex     | penses from line 22 above.  |             | 2:                     | 3b  | \$2,155.00 |  |
|                               | expenses from your monthly i  | ncome.      |                        |     | \$304.54   |  |
| The result is your mor        | thly net income.  |             | 2                      | -3c |            |  |
|                               | et to finish paying for your car<br>ease or decrease because of a r   |             |                        |     |            |  |

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| Fill in this information to identify your case: |                           |             |                              |  |  |  |  |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1  | Hugo                      |             | Villasana                    |  |  |  |  |
|   | First Name                | Middle Name | Last Name                    |  |  |  |  |
| Debtor 2  |                           |             |                              |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |  |  |  |  |
| United States E                                 | sankruptcy Court for the: | Northern    | District of Illinois (State) |  |  |  |  |
| Case number<br>(If known)                       |                           |             | (Glate)                      |  |  |  |  |

#### Official Form 106Dec

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pai | t 1: Sign Below   |   |  |  |  |  |  |  |  |
|-----|---|---|--|--|--|--|--|--|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |   |  |  |  |  |  |  |  |
|     | <b>✓</b> No   |   |  |  |  |  |  |  |  |
|     | Yes. Name of person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |  |  |  |
|     |   |   |  |  |  |  |  |  |  |
|     |   |   |  |  |  |  |  |  |  |
|     | Under penalty of perjury, I declare that I have read the summary that they are true and correct.  | and schedules filed with this declaration and   |  |  |  |  |  |  |  |
| ×   | •   | ×   |  |  |  |  |  |  |  |
|     | Signature of Debtor 1   | Signature of Debtor 2   |  |  |  |  |  |  |  |
|     | Date 1/30/2017  | Date  |  |  |  |  |  |  |  |
|     | MM/DD/YYYY  | MM/DD/YYYY  |  |  |  |  |  |  |  |

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| Fill i          | n this i      | nformation           | on to identify your o  | case:               |  |                     |                   |                      |   |
|-----------------|---------------|----------------------|------------------------|---------------------|--|---------------------|-------------------|----------------------|---|
| Deb             | tor 1         | Hu                   | -                      |                     | Villasa  |                     | _                 |                      |   |
| Deb             | tor 2         | Firs                 | st Name                | Middle              | Name Last I  | Name                |                   |                      |   |
| (Spot           | use, if filir | ng) Fire             | st Name                | Middle              | Name Last I  | Name                | _                 |                      |   |
| Unit            | ed Stat       | tes Bankr            | ruptcy Court for the:  | Northern            | District of I                                      | Illinois<br>(State) | _                 |                      |   |
| Case<br>(If knd | e numb        | ber                  |                        |                     | ·  | (Otato)             | _                 |                      |   |
| ,               | •             | -1 -                 | 107                    |                     |  |                     |                   |                      | Check if this is a                      |
| OT              | TICI          | al Fo                | rm 107                 |                     |  |                     |                   |                      | amended filing                          |
| Sta             | aten          | nent                 | of Financia            | al Affairs f        | for Individual                                     | s Filing fo         | or Bankru         | ıptcy                | 12/1                                    |
| info            | rmatio        | n. If mo             |                        | ed, attach a sep    | narried people are fili<br>parate sheet to this fo |                     |                   |                      | supplying correct<br>your name and case |
| Pari            | t 1: C        | Give De              | tails About Your       | Marital Status      | and Where You Liv                                  | ved Before          |                   |                      |   |
| 1.              | Wha           | ıt is your           | current marital st     | atus?               |  |                     |                   |                      |   |
|                 | П             | Married              |                        |                     |  |                     |                   |                      |   |
|                 | V             | Not mar              | ried                   |                     |  |                     |                   |                      |   |
| 2.              | Duri          | ing the la           | ast 3 years, have yo   | ou lived anywher    | e other than where yo                              | u live now?         |                   |                      |   |
|                 | <b>V</b>      | No                   |                        |                     |  |                     |                   |                      |   |
|                 |               | Yes. List            | t all of the places ye | ou lived in the las | st 3 years. Do not inclu                           | de where you live   | e now.            |                      |   |
|                 |               |                      |                        |                     |  |                     |                   |                      |   |
|                 |               | Debtor '             | 1:                     |                     | Dates Debtor 1 live there                          | ed Debtor 2:        |                   |                      | Dates Debtor 2 lived there              |
|                 |               |                      |                        |                     |  | Same                | as Debtor 1       |                      | Same as Debtor 1                        |
|                 |               |                      |                        |                     |  |                     |                   |                      |   |
|                 |               | Number               | Street                 |                     | From   | Number S            | treet             |                      | From                                    |
|                 |               |                      |                        |                     | To   |                     |                   |                      | То                                      |
|                 |               | City                 | State                  | Zip Code            |  | City                | State             | Zip Code             |   |
|                 |               |                      |                        |                     |  | Same                | as Debtor 1       |                      | Same as Debtor 1                        |
|                 |               |                      |                        |                     | F  |                     |                   |                      | France                                  |
|                 |               | Number               | Street                 |                     | From<br>To   | Number S            | treet             |                      | From<br>To                              |
|                 |               |                      |                        |                     |  |                     |                   |                      |   |
|                 | _             | City                 | State                  | Zip Code            |  | City                | State             | Zip Code             |   |
| 3.              | Withir        | n the las            | t 8 years, did you e   | ver live with a sp  | pouse or legal equival                             | ent in a commun     | ity property stat | te or territory? (Co | ommunity property states                |
|                 | and te        | <i>erritories</i> ir | nclude Arizona, Calif  | ornia, Idaho, Loui  | siana, Nevada, New Me                              | xico, Puerto Rico,  | Texas, Washingto  | on, and Wisconsin.)  |   |
|                 | <b>✓</b> N    |                      | au                     |                     | 0 111 (000):=                                      | 4001."              |                   |                      |   |
|                 | $\square^{Y}$ | es. Mak              | e sure you fill out S  | chedule H: Your     | Codebtors (Official Fo                             | orm 106H).          |                   |                      |   |

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Villasana

Debtor 1 Hugo Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$2499.75 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$34508.50 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$33773.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Villasana Debtor 1 Hugo \_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| or 1 Hugo   |   | Villa                                  | isana  | Case number                                 | (if known)                                       |
|---|---|--|--|---|--|
| First Name  | Middle Name   | Last                                   | Name   |   |  |
| agent, including one for a b<br>such as child support and a   | es; any general partners<br>are an officer, director, p<br>usiness you operate as | ; relatives of any goerson in control, | general partners; part<br>or owner of 20% or | nerships of which y<br>more of their voting |  |
| No  | to on incider   |  |  |   |  |
| Yes. List all payments  | to an insider.  | Dates of                               | Total amount                                 | Amountvou                                   | December for this payment                        |
|   |   | payment                                | paid   | Amount you still owe                        | Reason for this payment                          |
| Insider's Name  |   |  |  |   |  |
| Number Street   |   |  |  |   |  |
| City State  | Zip Code  |  |  |   |  |
| Insider's Name  |   |  |  |   |  |
| November Object   |   |  |  |   |  |
| Number Street   |   |  |  |   |  |
| City State  | Zip Code  |  |  |   |  |
| only online   | p   |  |  |   |  |
| insider? Include payments on debts  No Yes. List all payments | guaranteed or cosigned  | d by an insider.                       | Total amount paid                            | Amount you still owe                        | Reason for this payment  Include creditor's name |
| Insider's Name  |   |  |  |   |  |
| Number Street   |   |  |  |   |  |
| City State  | Zip Code  |  |  |   |  |
|   |   |  |  |   |  |
| Insider's Name  |   |  |  |   |  |
| Number Street   |   |  |  |   |  |
|   |   |  |  |   |  |
| City State  | Zip Code  |  |  |   |  |

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Villasana Debtor 1 Hugo Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Hugo<br>First N | Jame                             | Middle Name   | Villasana<br>Last Name        | Case number (if known)                        |                        |
|------|-----------------------|----------------------------------|---|-------------------------------|---|------------------------|
| 11.  |                       |                                  | ed for bankruptcy, did<br>a payment because yo      |                               | bank or financial institution, set off any am | ounts from your        |
|      | Yes                   | . Fill in the details.           |   |                               |   |                        |
|      | _                     |                                  |   | Describe the action th        | e creditor took Date action was taken         | Amount                 |
|      | Cred                  | litor's Name                     |   |                               |   |                        |
|      | Nun                   | nber Street                      |   |                               |   |                        |
|      |                       |                                  |   | Last 4 digits of account      | number: XXXX-                                 |                        |
|      | City                  | State                            | Zip Code  |                               |   |                        |
| 12.  |                       |                                  | d for bankruptcy, was a<br>lian, or another officia |                               | possession of an assignee for the benefit of  | of creditors, a court- |
|      | ✓ No                  |                                  |   |                               |   |                        |
|      | Yes                   |                                  |   |                               |   |                        |
| Part | 5: List               | Certain Gifts and                | Contributions                                       |                               |   |                        |
| 13.  | Within                | 2 years before you fil           | led for bankruptcy, did                             | l you give any gifts with a t | otal value of more than \$600 per person?     |                        |
|      | ✓ No<br>Yes           | s. Fill in the details fo        | r each gift.  |                               |   |                        |
|      |                       | s with a total value o<br>person | of more than \$600                                  | Describe the gifts            | Dates you gave the gifts                      | Value                  |
|      |                       |                                  |   |                               |   |                        |
|      | Pers                  | on to Whom You Gav               | ve the Gift   |                               |   |                        |
|      | Nun                   | nber Street                      |   |                               |   |                        |
|      | City                  | State                            | Zip Code  |                               |   |                        |
|      |                       | on's relationship to yo          | ou<br>Du  |                               |   |                        |
|      |                       |                                  |   |                               |   |                        |
|      | Pers                  | on to Whom You Gav               | ve the Gift   |                               |   |                        |
|      | Nun                   | nber Street                      |   |                               |   |                        |
|      | City                  | State                            | Zip Code  | •                             |   |                        |
|      | Pers                  | on's relationship to yo          | ou  |                               |   |                        |

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| Debt |          | Hugo  | Villasana  | Case number (if known)                            |                          |
|------|----------|---|--|---|--------------------------|
|      |          | First Name Middle Name  | Last Name  |   |                          |
|      |          | N. A  | P. J   |   | 000 1                    |
| 14.  | Wit      | hin 2 years before you filed for bankruptcy, o  | did you give any gifts or contribu                         | tions with a total value of more than \$          | 600 to any charity?      |
|      | ~        | No  |  |   |                          |
|      | Ħ        | Yes. Fill in the details for each gift or contrib   | ution.   |   |                          |
|      |          | Gifts or contributions to charities   |  | hutad Data way                                    | Value                    |
|      |          | that total more than \$600  | Describe what you contr                                    | buted Date you contribute                         | Value                    |
|      |          | that total more than \$000  |  | Contribute  | u                        |
|      |          |   |  |   |                          |
|      |          | Charity's Name  | <u> </u>   |   |                          |
|      |          |   |  |   |                          |
|      |          |   |  |   |                          |
|      |          | Number Street   |  |   |                          |
|      |          |   |  |   |                          |
|      |          | City State Zip Code   |  |   |                          |
|      |          |   |  |   |                          |
| Part | 6:       | List Certain Losses   |  |   |                          |
|      |          |   |  |   |                          |
| 15.  |          | hin 1 year before you filed for bankruptcy or   | since you filed for bankruptcy, o                          | lid you lose anything because of theft,           | fire, other disaster, or |
|      | gan      | nbling?   |  |   |                          |
|      | <b>V</b> | No  |  |   |                          |
|      | H        | Yes. Fill in the details.   |  |   |                          |
|      |          | res. Fill III the details.  |  |   |                          |
|      |          | Describe the property you lost and  | Describe any insurance                                     |   |                          |
|      |          | how the loss occurred   | Include the amount that in                                 |   | lost                     |
|      |          |   | pending insurance claims                                   | on line 33 of Schedule                            |                          |
|      |          |   | A/B: Property.   |   |                          |
|      |          |   |  |   |                          |
| D    | _        | List Certain Payments or Transfers  |  |   |                          |
|      |          | out seeking bankruptcy or preparing a bankro  |  |   |                          |
|      | Incl     | ude any attorneys, bankruptcy petition preparers  No  |  | services required in your bankruptcy.             |                          |
|      | Incl     | ude any attorneys, bankruptcy petition preparers  |  | services required in your bankruptcy.             |                          |
|      | Incl     | ude any attorneys, bankruptcy petition preparers  No  |  |   | ent Amount of            |
|      | Incli    | ude any attorneys, bankruptcy petition preparers  No  | , or credit counseling agencies for                        |   | ent Amount of payment    |
|      | Incl     | ude any attorneys, bankruptcy petition preparers  No  | or credit counseling agencies for Description and value of | any property Date paym                            |                          |
|      | Incl     | ude any attorneys, bankruptcy petition preparers  No  Yes. Fill in the details.  Semrad Law Firm  | or credit counseling agencies for Description and value of | any property Date paym or transfer                |                          |
|      | Incli    | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      | Incli    | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street  | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      | Incli    | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      | Incli    | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street  | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      | Incli    | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor   | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      | Incli    | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603  | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor   | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603  | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address   | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code  | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address   | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address   | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid               | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  Person Who Made the Payment, if Not You                                  | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid               | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid               | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid               | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid               | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid               | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |
|      |          | No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | Description and value of transferred                       | any property Date paym<br>or transfer<br>was made | payment                  |

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| Deb |             | Hugo  |  | Villasana                                     | Case number (if known)  |   |                              |
|-----|-------------|---|--|---|---|---|------------------------------|
|     |             | First Name  | Middle Name  | Last Name                                     |   |   |                              |
| 17. | help        | hin 1 year before you filed<br>o you deal with your credi<br>not include any payment or | tors or to make paym                               | ents to your creditors?                       | our behalf pay or transfer any                                      | rproperty to anyone                       | who promised to              |
|     |             | No<br>Yes. Fill in the details.   |  |   |   |   |                              |
|     |             |   |  | Description and value of transferred          | pa<br>tr:   | ate Amo<br>ayment or<br>ansfer was<br>ade | ount of payment              |
|     |             | Person Who Was Paid   |  |   | _   | <u> </u>                                  |                              |
|     |             | Number Street   |  |   |   |   |                              |
|     |             | City State  | Zip Code   |   |   |   |                              |
| 18. | the<br>Incl | ordinary course of your b   | usiness or financial af<br>and transfers made as s | fairs?<br>ecurity (such as the granting of    | eransfer any property to anyon<br>a security interest or mortgage o |   | •                            |
|     |             |   |  | Description and value of property transferred |   | operty or<br>ved or debts paid            | Date<br>transfer was<br>made |
|     |             | Person Who Received Tran  | nsfer  |   |   |   |                              |
|     |             | Number Street   |  |   |   |   |                              |
|     |             | City State<br>Person's relationship to yo   | Zip Code<br>u                                      |   |   |   |                              |
|     |             | Person Who Received Tran  | nsfer  |   |   |   |                              |
|     |             | Number Street   |  |   |   |   |                              |
|     |             | City State<br>Person's relationship to yo   | Zip Code<br>u                                      |   |   |   |                              |
| 19. | ben         | hin 10 years before you fil<br>eficiary?<br>ese are often called asset-pro<br>No        |  | l you transfer any property to                | a self-settled trust or similar                                     | device of which you                       | ı are a                      |
|     |             | Yes. Fill in the details.   |  | B i . i .                                     |   |   | D. I.                        |
|     |             |   |  | Description and value of                      | the property transferred  |   | Date<br>transfer was<br>made |
|     |             | Name of trust   |  |   |   |   |                              |

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Villasana Debtor 1 Hugo Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Bank of America Checking XXXX-0000 12/2016 \$ 800.00 Person Who Was Paid Savings P.O. Box 25118 Number Street Money market Brokerage Florida 33622 Tampa Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Number Street City State Zip Code City State Zip Code

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Villasana Debtor 1 Hugo Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debtor  |                           |               |                     | Villasana                  | Case                  | number (if known)                                 |                 |
|---------|---------------------------|---------------|---------------------|----------------------------|-----------------------|---|-----------------|
|         | First Name                |               | Middle Name         | Last Name                  |                       |   |                 |
| _       | T No.                     | ty in any jud | icial or administra | ative proceeding unde      | er any environmenta   | al law? Include settlements and o                 | rders.          |
| Ľ       | No<br>Yes. Fill in the de | etails.       |                     |                            |                       |   |                 |
|         | •                         |               |                     | Court or agency            |                       | Nature of the case                                | Status of the   |
|         | Case title                |               |                     |                            |                       |   | case            |
|         |                           |               |                     | Court Name                 |                       |   | Pending         |
|         | Case number               |               |                     | NumberStreet               |                       |   | On appeal       |
|         |                           |               | ;                   | City State                 | Zip Code              |   | Concluded       |
| Part 11 | Give Details A            | bout Your     |                     | onnections to Any B        | ·                     |   |                 |
|         | _                         |               |                     |                            |                       |   |                 |
| 27. W   | ithin 4 years before      | you filed fo  | r bankruptcy, did   | you own a business o       | or have any of the fo | ollowing connections to any busing                | ess?            |
|         |                           |               |                     | ide, profession, or oth    | =                     | I-time or part-time                               |                 |
|         | A member of A partner in  |               |                     | LC) or limited liability p | partnersnip (LLP)     |   |                 |
|         |                           | -             | -                   | e of a corporation         |                       |   |                 |
|         |                           |               |                     | quity securities of a co   | orporation            |   |                 |
|         | No None of the            | ahove annli   | es. Go to Part 12.  |                            |                       |   |                 |
| ¥       | -                         |               |                     | details below for each     | n husiness            |   |                 |
|         | Too. Oncon all a          | iai appiy ab  |                     |                            | ture of the business  | s Employer Identification                         | n number Do not |
|         |                           |               |                     |                            |                       | include Social Security                           |                 |
|         | Business Name             |               |                     | _                          |                       | EIN:  |                 |
|         | Number Street             |               |                     | _                          |                       | Dates business existed                            | I               |
|         |                           |               |                     | Name of accour             | ntant or bookkeepe    |   |                 |
|         | City                      | State         | Zip Code            |                            |                       | From To   |                 |
|         |                           |               |                     |                            |                       |   |                 |
|         |                           |               |                     | Describe the na            | ture of the business  | s Employer Identification include Social Security |                 |
|         | Business Name             |               |                     | _                          |                       | EIN:  |                 |
|         |                           |               |                     | _                          |                       | B. L. L. L.                                       |                 |
|         | Number Street             |               |                     | Name of accour             | ntant or bookkeepe    | Dates business existed                            |                 |
|         | City                      | State         | Zip Code            | _                          |                       | From To   |                 |
|         |                           |               |                     |                            |                       |   |                 |
|         |                           |               |                     |                            |                       |   |                 |
|         |                           |               |                     | Describe the na            | ture of the business  | s Employer Identification include Social Security |                 |
|         | Business Name             |               |                     | _                          |                       | EIN:  |                 |
|         | Number Street             |               |                     | _                          |                       | Dates business existed                            | i               |
|         | City                      | State         | Zip Code            | Name of accour             | ntant or bookkeepe    |   |                 |
|         | Oity                      | Glate         | Zip Oode            |                            |                       | From To   |                 |
|         |                           |               |                     |                            |                       |   |                 |
|         |                           |               |                     |                            |                       |   |                 |

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| Debt   | tor 1        | Hugo   |                                |   | Villasana                     | Case number (if known)  |
|--------|--------------|--|--------------------------------|---|-------------------------------|---|
|        |              | First Name   |                                | Middle Name                                 | Last Name                     |   |
| 28.    |              | nin 2 years before<br>ditors, or other par<br>No<br>Yes. Fill in the det | rties.                         | bankruptcy, did yo                          | u give a financial stateme    | nt to anyone about your business? Include all financial institutions,   |
|        | ш            |  |                                |   | Date issued                   |   |
|        |              |  |                                |   | Date Issueu                   |   |
|        |              | Name   |                                |   | MM/DD/YYYY                    |   |
|        |              |  |                                |   | _                             |   |
|        |              | Number Street  |                                |   |                               |   |
|        |              | City   | State                          | Zip Code                                    | -                             |   |
|        |              | City   | State                          | Zip Code                                    |                               |   |
| Part   | 12:          | Sign Below   |                                |   |                               |   |
| t      | rue a        | and correct. I unde<br>kruptcy case can                                  | erstand that<br>result in fine | making a false stat<br>s up to \$250,000, o | tement, concealing proper     | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|        |              | /S/  | Hugo Villasanure of Debtor     |   |                               | Signature of Debtor 2   |
|        |              | oigriati   | are or Debtor                  |   |                               | Date  |
|        |              | Date 1   | 1/30/2017                      |   |                               | Date  |
|        | Did yo       | ou attach addition   | al pages to                    | our Statement of                            | Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)?  |
| [<br>[ | <b>✓</b> N   |  | , 0                            |   |                               |   |
|        | <del>_</del> |  |                                |   |                               | and work as for wear 0  |
|        | JIQ Y        | ou pay or agree to   | pay someon                     | e who is not an att                         | orney to help you fill out b  | ankruptcy forms?  |
| [      | ✓ N          | lo   |                                |   |                               |   |
|        | Y            | es. Name of persor   | ı                              |   |                               | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).  |

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B 203 (12/94)

## **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re | Hugo Villasana   | Case No.                               |                             |
|-------|--|--|-----------------------------|
| _     | Debtor   |  | (If known)                  |
|       |  | Chapter                                | Chapter 13                  |
|       | DISCLOSURE OF COMPENSATION   | ON OF ATTORNEY F                       | OR DEBTOR                   |
| 1     | . Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cer compensation paid to me within one year before the filing of th rendered or to be rendered on behalf of the debtor(s) in contem | e petition in bankruptcy, or agreed to | be paid to me, for services |
|       | For legal services, I have agreed to accept  |  | \$2,900.0                   |
|       | Prior to the filing of this statement I have received  |  | \$0.0                       |
|       | Balance Due  |  | \$2,900.0                   |
| 2     | . The source of the compensation paid to me was:   |  |                             |
|       | Debtor Other (specif   | y)                                     |                             |
| 3     | . The source of the compensation paid to me is:  |  |                             |
|       | Debtor Other (specif   | y)                                     |                             |
| 4     | I have not agreed to share the above-disclosed compensation members and associates of my law firm.   | ion with any other person unless the   | y are                       |
|       | I have agreed to share the above-disclosed compensation was members or associates of my law firm. A copy of the agreed the people sharing in the compensation, is attached.                        |  |                             |
| 5     | <ul> <li>In return for the above-disclosed fee, I have agreed to render leg<br/>a. Analysis of the debtor's financial situation, and rendering<br/>bankruptcy;</li> </ul>                          |  |                             |
|       | b. Preparation and filing of any petition, schedules, statem   | nents of affairs and plan which may b  | pe required;                |
|       | c. Representation of the debtor at the meeting of creditors  | s and confirmation hearing, and any a  | adjourned hearings thereof; |
|       | d. Representation of the debtor in adversary proceedings a   | and other contested bankruptcy mat     | ters;                       |
| 6     | . By agreement with the debtor(s), the above-disclosed fee does  | not include the following services:    |                             |
|       |  |  |                             |

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B 203 (12/94)

| CERTIFICATION  |  |  |  |
|--|--|--|--|
| I certify that the foregoing is a complete sidebtor(s) in this bankruptcy proceedings. | tatement of any agreement or arrangement for payment to me for representation of the |  |  |
| 1/30/2017  | /s/ Elizabeth Placek   |  |  |
| Date   | Signature of Attorney  |  |  |
|  | Semrad Law Firm  |  |  |
|  | Name of law firm   |  |  |

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

## E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$2,900.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$387.00
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$2,900.00; and \$77.00 for expenses, leaving a balance due of \$3,287.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 1/30/2017    |                        |
|--------------------|------------------------|
| Signed:            |                        |
| /s/ Hugo Villasana |                        |
|                    | /s/ Elizabeth Placek   |
| Debtor(s)          | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

## **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

## Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1 717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

## Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

# Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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## **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

| In re:        | Villasana, Hugo                              | Case No                                   |                                      |
|---------------|--|---|--------------------------------------|
|               | Debtor(s)                                    |   |                                      |
|               |  | Chapter.                                  | Chapter13                            |
|               | VERIFIC                                      | ATION OF CREDITOR MAT                     | ΓRIX                                 |
| T<br>knowledg | The above named Debtors hereby verify<br>le. | that the attached list of creditors is to | rue and correct to the best of their |
| Date:         | 1/30/2017                                    | /s/ Villasana, Hu<br>Villasana, Hugo      | go                                   |
|               |  | Signature of Del                          | btor                                 |

BK OF AMER PO BOX 1598 NORFOLK, VA, 23501

CAP ONE 26525 N RIVERWOODS BLVD METTAWA, IL, 60045

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| Debtor 1 Hugo<br>First Name  | Middle Name   | Villasana   | Case number [[[know   | nj  |
|--|---|---|---|---|
| CONTROL OF THE PROPERTY OF THE | estions for Reporting Purpose   | Last Name   |   |   |
| 16. What kind of debts do you have?  |   | y consumer debts?<br>al primarily for a pers<br>y business debts? <i>B</i><br>investment or throug      | onal, family, or housel<br>dusiness debts are deb<br>gh the operation of the                        | ts that you incurred to obtain business or investment.  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  | No.   | er 7. Do vou estimate th  | at after any exempt prop<br>to distribute to unsecure   | perty is excluded and administrative d creditors?   |
| 18. How many creditors<br>do you estimate that<br>you owe?   | 7 1-49<br>50-99<br>100-199<br>200-999   | 1,000-5,0<br>5,001-10,<br>10,001-28   | 000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |
| 19. How much do you<br>estimate your assets<br>to be worth?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$10,000,0<br>\$50,000,0  | 1-\$10 million<br>01-\$50 million<br>01-\$100 million<br>001-\$500 million                          | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion                            |
| 20. How much do you estimate your liabilities to be?  Part 7: Sign Below   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | 丁 \$10,000,0<br>丁 \$50,000,0  | 1-\$10 million<br>01-\$50 million<br>01-\$100 million<br>001-\$500 million                          | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion                            |
|  | If I have chosen to file under Ch<br>of title 11, United States Code.<br>under Chapter 7.<br>If no attorney represents me and | apter 7, I am aware to<br>I understand the relie  | nat I may proceed, if elef available under each   | e information provided is true and ligible, under Chapter 7, 11,12, or 13 chapter, and I choose to proceed o is not an attorney to help me fill |
|  | out this document, i nave obtail<br>I request relief in accordance wi<br>I understand making a false stat                     | th the chapter of title the chapter of title tement, concealing plase can result in fine 519, and 3571. | ce required by 11 U.S<br>11, United States Co<br>operty, or obtaining n<br>s up to \$250,000, or in | .C. § 342(b).<br>de, specified in this petition.<br>noney or property by fraud in<br>mprisonment for up to 20 years, or                         |

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| No. of the Control of |  |  |  |  |   |
|--|--|--|--|--|---|
| Fill in this info  | mation to identify your  | Case:  |  |  |   |
| Debtor 1   | Hugo   |  | Villasana  |  |   |
| _  | First Name   | Middle Name  | Last Name  |  |   |
| Debtor 2<br>(Spouse, if filing)  | First Name   | 5.6:3.41 - 6.1   |  |  |   |
| Helton Chal P  |  | Middle Name  | Last Name  |  |   |
| United States E  | Bankruptcy Court for the   | Northern   | District of Illinois (State)   |  |   |
| Case number<br>(If known)  |  |  | (State)  | \$   |   |
|  |  | ***************************************                                  | ***************************************  |  | #8000444  |
| Official   | Form 106De   | <u>∋c</u>  |  |  | Check if this is a<br>amended filing  |
| Declarat   | ion About an   | Individual Debto   | r's Schedules  | 3  | 12/1:   |
|  | ***************************************  | ner, both are equally respons  | ORANGO DE CAMBRO |  | 12/13   |
| Pariste Sign   |  |  |  |  | anno de la decembra de la companio de Historia de la companio del la companio de  la companio de  la companio de  la companio |
| na you pa  | ly or agree to pay som   | eone who is NOT an attorney  | to help you fill out bank  | cruptcy forms?                               |   |
| No No  |  |  |  |  |   |
| Find Yes. N  | lame of person   |  | Attach Bankruptcy F  | Petition Preparer's Notice, Declaration, and |   |
|  |  |  | Signature (Official Fo   | om 119).                                     |   |
|  |  |  |  |  |   |
|  |  | and the second   |  |  | :   |
| lindor non   | ather at a selection to the  | Simple of  |  |  |   |
| that they a  | arry or perjury, i declar<br>are true and correct.   | e that I have read the summa   | ary and schedules filed v  | vith this declaration and                    |   |
| ✗ /s/ Hugo \   | /illacana  | Muri   |  |  |   |
| Signature of   | Debtor 1   | <u> </u>   | Signatura  | of Debtor 2                                  | · · · · · · · · · · · · · · · · · · ·   |
| Date 1/28/   | 2017   |  | -  | or pepilor 5                                 |   |
|  | DDAYYY   |  | Date<br>MM   | M/DD/YYYY                                    |   |
|  | The second secon | And the second are a second as a second account of the second account of |  |  | :   |

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| Debtor 1 Hugo                   |   |   | Villasana                    | Out and the second  |
|---------------------------------|---|---|------------------------------|---|
| First Nan                       | nê                                      | Middle Name                                   | Last Name                    | Case number (if known)  |
| 00 140                          |   | on the task and a second contract of the con- | eren e karan na aryan san    | where the same and the contract of the same and the same |
| 28. Within 2 ye<br>creditors, o | ars before you filed for other parties. | er bankruptcy, did yo                         | ou give a financial statem   | ent to anyone about your business? Include all financial institutions   |
|                                 | ,                                       |   |                              |   |
| ✓ No                            |   |   |                              | •   |
| Yes. Fi                         | Il in the details below.                |   | •                            |   |
|                                 |   |   | Date issued                  |   |
| Name                            |   |   | MM/DD/YYYY                   |   |
|                                 |   |   |                              |   |
| Numb                            | er Street                               |   | _                            |   |
| City                            |   | A.M   | <u>.</u>                     |   |
| City                            | State                                   | Zip Code                                      |                              |   |
| ant 124 Sign B                  | Below                                   |   |                              |   |
|                                 | /s/ Hugo Villasa                        |   | rtmprisonment for up to      | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  |
|                                 | Signature of Debtor                     |   |                              | Signature of Debtor 2   |
|                                 | Date 1/28/2017                          |   |                              | Date  |
|                                 |   |   |                              |   |
| Did you attac                   | n additional pages to                   | Your Statement of F                           | inancial Affairs for Individ | tuals Filing for Bankruptcy (Official Form 107)?  |
| <b>√</b> No                     |   |   |                              |   |
| Yes                             |   |   |                              |   |
| Did                             |   |   |                              |   |
| ⊷id you pay or                  | agree to pay someor                     | e who is not an atto                          | orney to help you fill out b | ankruptcy forms?  |
| ☑ No                            |   |   | •                            |   |
| Yes. Name                       | of person                               |   |                              | Attach the Bankruptcy Petition Preparer's Notice,   |
|                                 |   |   |                              | Declaration, and Signature (Official Form 119).   |

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## UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| in re:              | Villasana, Hugo                        | Case No   |  |              |
|---------------------|--|---|--|--------------|
|                     | Debtor(s)                              | Chapter.  | Chapter13  |              |
|                     | VERIFICATI                             | ION OF CREDITOR MATE  | IIX  |              |
| The a<br>knowledge. | above named Debtors hereby verify that | the attached list of creditors is true                        | and correct to the be                            | est of their |
| Date:               | 1/28/2017                              | /s/ Villasana, Hugo<br>Villasana, Hugo<br>Signature of Debtor | <del>\                                    </del> | Vens-        |

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| Del  | otor 1     | Hugo<br>First Name   |  | Villasana   | Case number (if known)  |  |
|------|------------|--|--|---|---|--|
|      |            |  | Middle Name  | Last Name   | OGO TOTALOS (IN MADE)   |  |
| 16   | Cal        | culate the median family                                   | / income that applies to y   | ou. Follow these steps:                             |   |  |
|      | 16a        | L Fill in the state in which y                             | ou live.   | Illinois  |   |  |
|      |            | . Fill in the number of peop                               |  | 1   |   |  |
|      | 16c        | . Fill in the median family in                             | ncome for your state and siz   | e of  |   | \$50,133.00                            |
|      |            | household using the link specified in                      | the encorate instruction   | To find a   | list of applicable median income amounts, go online   | 400,100,00                             |
| 17.  | Hov        | v do the lines compare?                                    | rue sebarate aistructions to   | r this form. This list may                          | also be available median income amounts, go online also be available at the bankruptcy clerk's office.    |  |
|      |            | Line 15b is less than                                      | or equal to line 16c. On the   | top of page 1 of this fo                            | rm, check box 1, Disposable income is not determined  |  |
|      |            |  |  | NOT III out Calculation                             | of Disposable Income (Official Form 122C-2).  |  |
|      | 17b        |  | n line 16c. On the top of pa<br>Go to Part 3 and fill out C<br>ant monthly income from lin |   | box 2, Disposable income is determined under 11 to le Income (Official Form 122C-2). On line 39 of that   |  |
|      | 3H (       | Calculate Your Comm  | itment Period Under 1  | 1 U.S.C. §1325(b)(4                                 | <b>(</b> )  |  |
| 18.  |            |  | thly income from line 11.  |   |   | \$1,929.37                             |
| 19,  | Ded<br>com | uct the marital adjustme<br>mitment period under 11 L      | nt if it applies. If you are n<br>J.S.C. § 1325(b)(4) allows y                             | named, your spouse is n<br>ou to deduct part of you | ot filing with you, and you contend that calculating the r spouse's income, copy the amount from line 13. | 01,323.37                              |
|      | 19a.       | If the marital adjustment d                                | loes not apply, fill in 0 on lin   | e 19a.  | , see a sepy we discount norm line 75.  | -\$0.00                                |
|      |            | Subtract line 19a from li                                  |  |   |   | \$1,929.37                             |
| 20.  | Calc       | ulate your current month                                   | nly income for the year. Fo  | ollow these steps:                                  |   | \$1,323.37                             |
|      | 20a.       | Copy line 19b.   |  |   |   | \$1,929.37                             |
|      |            | Multiply by 12 (the number                                 | er of months in a year).   |   |   |  |
|      | 20b.       | The result is your current re                              | nonthly income for the year  | for this part of the form                           |   | x 12                                   |
|      |            |  |  |   |   | \$23,152.44                            |
|      | 20c.       | Copy the median family in                                  | come for your state and size   | of household from line                              | 16c.  | \$50,133.00                            |
| 21.  |            | do the lines compare?                                      |  |   |   |  |
|      |            | ine 20b is less than line 20<br>commitment period is 3 yea | oc. Unless otherwise orderecters. Go to Part 4.  | by the court, on the to                             | p of page 1 of this form, check box 3, The  |  |
|      | [] L       | ine 20b is more than or eq<br>, The commitment period      | jual to line 20c. Unless othe<br>is 5 years. Go to Part 4.                                 | rwise ordered by the cou                            | irt, on the top of page 1 of this form, check box   |  |
| aril | ) S        | gn Below   |  |   |   |  |
|      | В          | y signing here. I declare lyn                              | nder penalty of peniundina u   | no information and their co                         | atement and in any attachments is true and correct,   | ************************************** |
|      |            |  | 1 11 11 11 11 11 11 11 11 11 11 11 11 1  | Julianian on this st                                | atement and in any attachments is true and correct.   |  |
|      |            | 🗶 /s/ Hugo Villasana                                       | L-MI/M   | ×   |   |  |
|      |            | Signature of Debtor 1                                      | N  | Sigr  | alure of Debtor 2   |  |
|      |            | Date 1/28/2017   | THE FEBRUARY STATES  | Date  |   |  |
|      |            | MM/DD/YYYY   | V  | Date  | MM/DD/YYYY  |  |
|      | lf         | you checked 17a, do NOT                                    | fill out or file Form 122C-2.  |   |   |  |
|      | lf         | you checked 17b, fill out F                                | orm 122C-2 and file it with  | this form. On line 39 of                            | that form, copy your current monthly income from line 1   | A                                      |
|      | ab         | oove.  |  |   | and 1   | 4                                      |
|      |            |  |  |   |   | :                                      |

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B 203 (12/94)

## UNITED STATES BANKRUPTCY COURT

## Northern District of Illinois

| In re_ | Hugo Villasana   | Case No.   |   |
|--------|--|--|---|
|        | Debtor   |  | (If known)  |
|        |  | Chapter  | Chapter 13  |
|        | DISCLOSURE OF COMPENSATI   | ON OF ATTORNEY FO  | OR DERTOR   |
| 1.     | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered or to be rendered on behalf of the debtor(s) in content | ertify that I am the attorney for the abo  | venamed debtor(s) and that                              |
|        | For legal services, I have agreed to accept  |  | \$2,900.00  |
|        | Prior to the filling of this statement I have received   |  | \$0.00  |
|        | Balance Due  |  | \$2,900.00  |
| 2.     | The source of the compensation paid to me was:   |  | 92,300.00   |
|        | Debtor Other (specif   | fy)  |   |
| 3.     | The source of the compensation paid to me is:  |  |   |
|        | Debtor Other (specif   | fy)  |   |
| 4.     | I have not agreed to share the above-disclosed compensation members and associates of my law firm.   | ion with any other person unless they  | are   |
|        | I have agreed to share the above-disclosed compensation of members or associates of my law firm. A copy of the agreed the people sharing in the compensation, is attached.                     | with a other person or persons who an<br>ment, together with a list of the names | e not<br>of   |
| 5.     | In return for the above-disclosed fee, I have agreed to render leg<br>a. Analysis of the debtor's financial situation, and renderin<br>bankruptcy;   | gal service for all aspects of the bankrung advice to the debtor in determining  | uptcy case, including:<br>whether to file a petition in |
|        | b. Preparation and filing of any petition, schedules, statem   | nents of affairs and plan which may be   | required:   |
|        | c. Representation of the debtor at the meeting of creditors  |  |   |
|        | d. Representation of the debtor in adversary proceedings a   |  |   |
| 6. 1   | By agreement with the debtor(s), the above-disclosed fee does r  |  | ,   |
|        |  | <b></b>  |   |

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B 203 (12/94)

|  | CERTIFICATION         |  |  |
|--|-----------------------|--|--|
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. |                       |  |  |
| 1/28/2017  | /s/ Elizabeth Placek  |  |  |
| Date   | Signature of Attorney |  |  |
|  | Semrad Law Firm       |  |  |
| •  | Name of law firm      |  |  |
|  |                       |  |  |

HIV

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

## A. BEFORE THE CASE IS FILED

## THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

The same

## THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

## B. AFTER THE CASE IS FILED

## THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

## THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

## D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

## E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$2,900.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$387.00  $\,$
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$2,900.00; and \$77.00 for expenses, leaving a balance due of \$3,287.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Debtor(s)          |           | Attorney for Debtor(s) |  |
|--------------------|-----------|------------------------|--|
| <u> </u>           | <u> </u>  | /s/ Elizabeth Placek   |  |
| /s/ Hugo Villasana | Inpl/llun |                        |  |
| Signed:            |           |                        |  |
| Date: 1/28/2017    | 1 ()      |                        |  |

Do not sign if the fee amounts at top of this page are blank.